B1 (Official )	Form 1)(1/0	18)											
			United S Eas			ruptcy f Missou					Vol	untary 1	Petition
	ebtor (if indi , Bruce E		er Last, First,	Middle):				Name of Joint Debtor (Spouse) (Last, First, Middle):  Hopson, Linda Kathryn					
All Other Names used by the Debtor in the last 8 years (include married, maiden, and trade names):							All Other Names used by the Joint Debtor in the last 8 years (include married, maiden, and trade names):						
Last four digits of Soc. Sec. or Individual-Taxpayer I.D. (ITIN) No./Complete EIN (if more than one, state all)  xxx-xx-0346						(if mor	our digits of the than one, so	tate all)	· Individual-Ta	axpayer I.I	D. (ITIN) No	./Complete EIN	
Street Address of Debtor (No. and Street, City, and State):  8525 Vasel Ave Saint Louis, MO  ZIP Code					Street 85		Joint Debtor <b>Ave</b>	(No. and Stre	eet, City, ar	nd State):	ZIP Code		
County of R Saint Lo		of the Princ	cipal Place of	f Business		63123		y of Reside i <b>nt Louis</b>		Principal Plac	ce of Busin	ness:	63123
Mailing Address of Debtor (if different from street address):					Mailir	ng Address	of Joint Debt	or (if differen	t from stree	et address):			
					Г	ZIP Code	_					1	ZIP Code
Location of I			siness Debtor ove):				<u> </u>						
		Debtor				of Business				of Bankrupt Petition is Filo			n
See Exhi	(Form of Organization) (Check one box)  ■ Individual (includes Joint Debtors) See Exhibit D on page 2 of this form.  □ Corporation (includes LLC and LLP) □ Partnership □ Other (If debtor is not one of the above entities, check this box and state type of entity below.)  (Check one box) □ Health Care Business □ Single Asset Real Estate as defin 11 U.S.C. § 101 (51B) □ Railroad □ Stockbroker □ Commodity Broker □ Clearing Bank □ Other  Tax-Exempt Entity (Check box, if applicable) □ Debtor is a tax-exempt organiz			e) anization	defined	er 7 er 9 er 11 er 12 er 13 are primarily co	Check onsumer debts, § 101(8) as	apter 15 Pe a Foreign M apter 15 Pe a Foreign M of Debts one box)	etition for Re Main Proceed etition for Re Nonmain Pro	ling cognition			
		Eiling E	Charle on	Code		of the United nal Revenue	Code).	Code). a personal, family, or household purpose."					
Filing Fee (Check one box)  ■ Full Filing Fee attached  □ Filing Fee to be paid in installments (applicable to individuals only). Must attach signed application for the court's consideration certifying that the debtor is unable to pay fee except in installments. Rule 1006(b). See Official Form 3A.  □ Filing Fee waiver requested (applicable to chapter 7 individuals only). Must attach signed application for the court's consideration. See Official Form 3B.					or Check	Debtor is a if: Debtor's a to insiders all applica A plan is Acceptance	a small busin not a small bu aggregate non s or affiliates) ble boxes: being filed wi ces of the plan	ess debtor as usiness debtor	defined in as defined quidated de \$2,190,000 n.	thin 11 U.S.C. ebts (excluding).	C. § 101(51D).  ng debts owed  or more		
Statistical/Administrative Information  ☐ Debtor estimates that funds will be available for distribution to unsecured credite ☐ Debtor estimates that, after any exempt property is excluded and administrative there will be no funds available for distribution to unsecured creditors.						es paid,		THIS	SPACE IS F	OR COURT U	SE ONLY		
Estimated No.	fumber of Cr 50- 99	reditors  100- 199	200-	1,000- 5,000	5,001- 10,000	10,001- 25,000	25,001- 50,000	50,001- 100,000	OVER 100,000				
Estimated A:	\$50,001 to \$100,000	\$100,001 to \$500,000	\$500,001 to \$1	\$1,000,001 to \$10 million	\$10,000,001 to \$50 million		\$100,000,001 to \$500 million	\$500,000,001 to \$1 billion					
Estimated Li  \$0 to \$50,000	\$50,001 to \$100,000	\$100,001 to \$500,000	to \$1	\$1,000,001 to \$10 million	\$10,000,001 to \$50 million		\$100,000,001 to \$500 million	\$500,000,001 to \$1 billion					

B1 (Official Form 1)(1/08) Page 2 Name of Debtor(s): Voluntary Petition Hopson, Bruce Edwin (This page must be completed and filed in every case) Hopson, Linda Kathryn All Prior Bankruptcy Cases Filed Within Last 8 Years (If more than two, attach additional sheet) Case Number: Location Date Filed: Where Filed: - None -Location Case Number: Date Filed: Where Filed: Pending Bankruptcy Case Filed by any Spouse, Partner, or Affiliate of this Debtor (If more than one, attach additional sheet) Name of Debtor: Case Number: Date Filed: - None -District: Relationship: Judge: Exhibit B Exhibit A (To be completed if debtor is an individual whose debts are primarily consumer debts.) (To be completed if debtor is required to file periodic reports (e.g., I, the attorney for the petitioner named in the foregoing petition, declare that I forms 10K and 10Q) with the Securities and Exchange Commission have informed the petitioner that [he or she] may proceed under chapter 7, 11, 12, or 13 of title 11, United States Code, and have explained the relief available pursuant to Section 13 or 15(d) of the Securities Exchange Act of 1934 under each such chapter. I further certify that I delivered to the debtor the notice and is requesting relief under chapter 11.) required by 11 U.S.C. §342(b). ☐ Exhibit A is attached and made a part of this petition. X /s/ Robert Lawson June 11, 2009 Signature of Attorney for Debtor(s) (Date) Robert Lawson 551534,51935 David Gunn 502943,54880 Exhibit C Does the debtor own or have possession of any property that poses or is alleged to pose a threat of imminent and identifiable harm to public health or safety? Yes, and Exhibit C is attached and made a part of this petition. No. Exhibit D (To be completed by every individual debtor. If a joint petition is filed, each spouse must complete and attach a separate Exhibit D.) Exhibit D completed and signed by the debtor is attached and made a part of this petition. If this is a joint petition: ■ Exhibit D also completed and signed by the joint debtor is attached and made a part of this petition. Information Regarding the Debtor - Venue (Check any applicable box) Debtor has been domiciled or has had a residence, principal place of business, or principal assets in this District for 180 days immediately preceding the date of this petition or for a longer part of such 180 days than in any other District. There is a bankruptcy case concerning debtor's affiliate, general partner, or partnership pending in this District. Debtor is a debtor in a foreign proceeding and has its principal place of business or principal assets in the United States in this District, or has no principal place of business or assets in the United States but is a defendant in an action or proceeding [in a federal or state court] in this District, or the interests of the parties will be served in regard to the relief sought in this District. Certification by a Debtor Who Resides as a Tenant of Residential Property (Check all applicable boxes) Landlord has a judgment against the debtor for possession of debtor's residence. (If box checked, complete the following.) (Name of landlord that obtained judgment) (Address of landlord) Debtor claims that under applicable nonbankruptcy law, there are circumstances under which the debtor would be permitted to cure the entire monetary default that gave rise to the judgment for possession, after the judgment for possession was entered, and Debtor has included in this petition the deposit with the court of any rent that would become due during the 30-day period after the filing of the petition. Debtor certifies that he/she has served the Landlord with this certification. (11 U.S.C. § 362(l)).

B1 (Official Form 1)(1/08)

#### **Voluntary Petition**

(This page must be completed and filed in every case)

#### Signatures

#### Signature(s) of Debtor(s) (Individual/Joint)

I declare under penalty of perjury that the information provided in this petition is true and correct.

[If petitioner is an individual whose debts are primarily consumer debts and has chosen to file under chapter 7] I am aware that I may proceed under chapter 7, 11, 12, or 13 of title 11, United States Code, understand the relief available under each such chapter, and choose to proceed under chapter 7. [If no attorney represents me and no bankruptcy petition preparer signs the petition] I have obtained and read the notice required by 11 U.S.C. §342(b).

I request relief in accordance with the chapter of title 11, United States Code, specified in this petition.

#### ▼ /s/ Bruce Edwin Hopson

Signature of Debtor Bruce Edwin Hopson

#### X /s/ Linda Kathryn Hopson

Signature of Joint Debtor Linda Kathryn Hopson

Telephone Number (If not represented by attorney)

June 11, 2009

Date

#### Signature of Attorney\*

#### X /s/ Robert Lawson

Signature of Attorney for Debtor(s)

#### Robert Lawson 551534,51935 David Gunn 502943,54880

Printed Name of Attorney for Debtor(s)

#### The Bankruptcy Company

Firm Name

1600 S Brentwood Blvd, Suite 725 Saint Louis, MO 63144-0009

Address

Email: stlouis@tbcwam.com

314-961-9822 Fax: Fax: 314-961-9825

Telephone Number

June 11, 2009

Date

\*In a case in which § 707(b)(4)(D) applies, this signature also constitutes a certification that the attorney has no knowledge after an inquiry that the information in the schedules is incorrect.

#### Signature of Debtor (Corporation/Partnership)

I declare under penalty of perjury that the information provided in this petition is true and correct, and that I have been authorized to file this petition on behalf of the debtor.

The debtor requests relief in accordance with the chapter of title 11, United States Code, specified in this petition.

X

Signature of Authorized Individual

Printed Name of Authorized Individual

Title of Authorized Individual

Date

#### Signature of a Foreign Representative

I declare under penalty of perjury that the information provided in this petition is true and correct, that I am the foreign representative of a debtor in a foreign proceeding, and that I am authorized to file this petition.

(Check only one box.)

Name of Debtor(s):

Hopson, Bruce Edwin Hopson, Linda Kathryn

- ☐ I request relief in accordance with chapter 15 of title 11. United States Code. Certified copies of the documents required by 11 U.S.C. §1515 are attached.
- ☐ Pursuant to 11 U.S.C. §1511, I request relief in accordance with the chapter of title 11 specified in this petition. A certified copy of the order granting recognition of the foreign main proceeding is attached.

7	v
- 3	۸
_	3

Signature of Foreign Representative

Printed Name of Foreign Representative

Date

#### Signature of Non-Attorney Bankruptcy Petition Preparer

I declare under penalty of perjury that: (1) I am a bankruptcy petition preparer as defined in 11 U.S.C. § 110; (2) I prepared this document for compensation and have provided the debtor with a copy of this document and the notices and information required under 11 U.S.C. §§ 110(b), 110(h), and 342(b); and, (3) if rules or guidelines have been promulgated pursuant to 11 U.S.C. § 110(h) setting a maximum fee for services chargeable by bankruptcy petition preparers, I have given the debtor notice of the maximum amount before preparing any document for filing for a debtor or accepting any fee from the debtor, as required in that section. Official Form 19 is attached.

Printed Name and title, if any, of Bankruptcy Petition Preparer

Social-Security number (If the bankrutpcy petition preparer is not an individual, state the Social Security number of the officer, principal, responsible person or partner of the bankruptcy petition preparer.)(Required by 11 U.S.C. § 110.)

Address

Date

Signature of Bankruptcy Petition Preparer or officer, principal, responsible person, or partner whose Social Security number is provided above.

Names and Social-Security numbers of all other individuals who prepared or assisted in preparing this document unless the bankruptcy petition preparer is not an individual:

If more than one person prepared this document, attach additional sheets conforming to the appropriate official form for each person.

A bankruptcy petition preparer's failure to comply with the provisions of title 11 and the Federal Rules of Bankruptcy Procedure may result in fines or imprisonment or both 11 U.S.C. §110; 18 U.S.C. §156.

	Bruce Edwin Hopson			
In re	Linda Kathryn Hopson		Case No.	
		Debtor(s)	Chapter	7

### EXHIBIT D - INDIVIDUAL DEBTOR'S STATEMENT OF COMPLIANCE WITH CREDIT COUNSELING REQUIREMENT

Warning: You must be able to check truthfully one of the five statements regarding credit counseling listed below. If you cannot do so, you are not eligible to file a bankruptcy case, and the court can dismiss any case you do file. If that happens, you will lose whatever filing fee you paid, and your creditors will be able to resume collection activities against you. If your case is dismissed and you file another bankruptcy case later, you may be required to pay a second filing fee and you may have to take extra steps to stop creditors' collection activities.

Every individual debtor must file this Exhibit D. If a joint petition is filed, each spouse must complete and file a separate Exhibit D. Check one of the five statements below and attach any documents as directed.

- 1. Within the 180 days **before the filing of my bankruptcy case**, I received a briefing from a credit counseling agency approved by the United States trustee or bankruptcy administrator that outlined the opportunities for available credit counseling and assisted me in performing a related budget analysis, and I have a certificate from the agency describing the services provided to me. *Attach a copy of the certificate and a copy of any debt repayment plan developed through the agency*.
- □ 2. Within the 180 days **before the filing of my bankruptcy case**, I received a briefing from a credit counseling agency approved by the United States trustee or bankruptcy administrator that outlined the opportunities for available credit counseling and assisted me in performing a related budget analysis, but I do not have a certificate from the agency describing the services provided to me. You must file a copy of a certificate from the agency describing the services provided to you and a copy of any debt repayment plan developed through the agency no later than 15 days after your bankruptcy case is filed.
- □ 3. I certify that I requested credit counseling services from an approved agency but was unable to obtain the services during the five days from the time I made my request, and the following exigent circumstances merit a temporary waiver of the credit counseling requirement so I can file my bankruptcy case now. [Summarize exigent circumstances here.] \_\_\_\_

If your certification is satisfactory to the court, you must still obtain the credit counseling briefing within the first 30 days after you file your bankruptcy petition and promptly file a certificate from the agency that provided the counseling, together with a copy of any debt management plan developed through the agency. Failure to fulfill these requirements may result in dismissal of your case. Any extension of the 30-day deadline can be granted only for cause and is limited to a maximum of 15 days. Your case may also be dismissed if the court is not satisfied with your reasons for filing your bankruptcy case without first receiving a credit counseling briefing.

B 1D(Official Form 1, Exhibit D) (12/08) - Cont.
☐ 4. I am not required to receive a credit counseling briefing because of: [Check the applicable statement.] [Must be accompanied by a motion for determination by the court.]
☐ Incapacity. (Defined in 11 U.S.C. § 109(h)(4) as impaired by reason of mental illness or mental deficiency so as to be incapable of realizing and making rational decisions with respect to financial responsibilities.);
☐ Disability. (Defined in 11 U.S.C. § 109(h)(4) as physically impaired to the extent of being unable, after reasonable effort, to participate in a credit counseling briefing in person, by telephone, or through the Internet.);
☐ Active military duty in a military combat zone.
☐ 5. The United States trustee or bankruptcy administrator has determined that the credit counseling requirement of 11 U.S.C. § 109(h) does not apply in this district.
I certify under penalty of perjury that the information provided above is true and correct.
Signature of Debtor: //s/ Bruce Edwin Hopson  Bruce Edwin Hopson
Date: <u>June 11, 2009</u>

	Bruce Edwin Hopson			
In re	Linda Kathryn Hopson		Case No.	
		Debtor(s)	Chapter	7

### EXHIBIT D - INDIVIDUAL DEBTOR'S STATEMENT OF COMPLIANCE WITH CREDIT COUNSELING REQUIREMENT

Warning: You must be able to check truthfully one of the five statements regarding credit counseling listed below. If you cannot do so, you are not eligible to file a bankruptcy case, and the court can dismiss any case you do file. If that happens, you will lose whatever filing fee you paid, and your creditors will be able to resume collection activities against you. If your case is dismissed and you file another bankruptcy case later, you may be required to pay a second filing fee and you may have to take extra steps to stop creditors' collection activities.

Every individual debtor must file this Exhibit D. If a joint petition is filed, each spouse must complete and file a separate Exhibit D. Check one of the five statements below and attach any documents as directed.

- 1. Within the 180 days **before the filing of my bankruptcy case**, I received a briefing from a credit counseling agency approved by the United States trustee or bankruptcy administrator that outlined the opportunities for available credit counseling and assisted me in performing a related budget analysis, and I have a certificate from the agency describing the services provided to me. *Attach a copy of the certificate and a copy of any debt repayment plan developed through the agency*.
- □ 2. Within the 180 days **before the filing of my bankruptcy case**, I received a briefing from a credit counseling agency approved by the United States trustee or bankruptcy administrator that outlined the opportunities for available credit counseling and assisted me in performing a related budget analysis, but I do not have a certificate from the agency describing the services provided to me. You must file a copy of a certificate from the agency describing the services provided to you and a copy of any debt repayment plan developed through the agency no later than 15 days after your bankruptcy case is filed.
- □ 3. I certify that I requested credit counseling services from an approved agency but was unable to obtain the services during the five days from the time I made my request, and the following exigent circumstances merit a temporary waiver of the credit counseling requirement so I can file my bankruptcy case now. [Summarize exigent circumstances here.] \_\_\_\_

If your certification is satisfactory to the court, you must still obtain the credit counseling briefing within the first 30 days after you file your bankruptcy petition and promptly file a certificate from the agency that provided the counseling, together with a copy of any debt management plan developed through the agency. Failure to fulfill these requirements may result in dismissal of your case. Any extension of the 30-day deadline can be granted only for cause and is limited to a maximum of 15 days. Your case may also be dismissed if the court is not satisfied with your reasons for filing your bankruptcy case without first receiving a credit counseling briefing.

B 1D(Official Form 1, Exhibit D) (12/08) - Cont.
☐ 4. I am not required to receive a credit counseling briefing because of: [Check the applicable statement.] [Must be accompanied by a motion for determination by the court.]
☐ Incapacity. (Defined in 11 U.S.C. § 109(h)(4) as impaired by reason of mental illness or mental deficiency so as to be incapable of realizing and making rational decisions with respect to financial responsibilities.);
☐ Disability. (Defined in 11 U.S.C. § 109(h)(4) as physically impaired to the extent of being unable, after reasonable effort, to participate in a credit counseling briefing in person, by telephone, or through the Internet.);
☐ Active military duty in a military combat zone.
☐ 5. The United States trustee or bankruptcy administrator has determined that the credit counseling requirement of 11 U.S.C. § 109(h) does not apply in this district.
I certify under penalty of perjury that the information provided above is true and correct.
Signature of Debtor: Is/ Linda Kathryn Hopson Linda Kathryn Hopson
Date: June 11, 2009

In re	Bruce Edwin Hopson,		Case No.	
	Linda Kathryn Hopson			
-		Debtors	Chapter	7

### **SUMMARY OF SCHEDULES**

Indicate as to each schedule whether that schedule is attached and state the number of pages in each. Report the totals from Schedules A, B, D, E, F, I, and J in the boxes provided. Add the amounts from Schedules A and B to determine the total amount of the debtor's assets. Add the amounts of all claims from Schedules D, E, and F to determine the total amount of the debtor's liabilities. Individual debtors must also complete the "Statistical Summary of Certain Liabilities and Related Data" if they file a case under chapter 7, 11, or 13.

NAME OF SCHEDULE	ATTACHED (YES/NO)	NO. OF SHEETS	ASSETS	LIABILITIES	OTHER
A - Real Property	Yes	1	90,000.00		
B - Personal Property	Yes	4	10,903.41		
C - Property Claimed as Exempt	Yes	2			
D - Creditors Holding Secured Claims	Yes	1		179,435.95	
E - Creditors Holding Unsecured Priority Claims (Total of Claims on Schedule E)	Yes	1		0.00	
F - Creditors Holding Unsecured Nonpriority Claims	Yes	18		861,835.94	
G - Executory Contracts and Unexpired Leases	Yes	1			
H - Codebtors	Yes	1			
I - Current Income of Individual Debtor(s)	Yes	1			3,447.55
J - Current Expenditures of Individual Debtor(s)	Yes	2			3,962.00
Total Number of Sheets of ALL Schedu	ıles	32			
	To	otal Assets	100,903.41		
			Total Liabilities	1,041,271.89	

Eastern Distri	ct of Missouri		
Bruce Edwin Hopson, Linda Kathryn Hopson		Case No.	
	Debtors	-, Chapter	7
STATISTICAL SUMMARY OF CERTAIN L	IABILITIES	AND RELATE	D DATA (28 U.S
you are an individual debtor whose debts are primarily consumer ase under chapter 7, 11 or 13, you must report all information red	debts, as defined i quested below.	n § 101(8) of the Banl	kruptcy Code (11 U.S.C
Check this box if you are an individual debtor whose debts a report any information here.	re NOT primarily o	consumer debts. You a	are not required to
is information is for statistical purposes only under 28 U.S.C. nmarize the following types of liabilities, as reported in the S		al them.	
ype of Liability	Amount		
omestic Support Obligations (from Schedule E)		0.00	
Caxes and Certain Other Debts Owed to Governmental Units from Schedule E)		0.00	
Claims for Death or Personal Injury While Debtor Was Intoxicated From Schedule E) (whether disputed or undisputed)		0.00	
tudent Loan Obligations (from Schedule F)		0.00	
Domestic Support, Separation Agreement, and Divorce Decree Obligations Not Reported on Schedule E		0.00	
Obligations to Pension or Profit-Sharing, and Other Similar Obligations From Schedule F)		0.00	
TOTAL		0.00	
ate the following:			
Average Income (from Schedule I, Line 16)		3,447.55	
verage Expenses (from Schedule J, Line 18)		3,962.00	
Current Monthly Income (from Form 22A Line 12; OR, Form 22B Line 11; OR, Form 22C Line 20)		4,180.15	
State the following:			
. Total from Schedule D, "UNSECURED PORTION, IF ANY" column			88,435.95
2. Total from Schedule E, "AMOUNT ENTITLED TO PRIORITY" column		0.00	
3. Total from Schedule E, "AMOUNT NOT ENTITLED TO PRIORITY, IF ANY" column			0.00
L Total from Schedule F			964 925 04

5. Total of non-priority unsecured debt (sum of 1, 3, and 4)

950,271.89

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111	10

Bruce Edwin Hopson, Linda Kathryn Hopson

#### Debtors

#### **SCHEDULE A - REAL PROPERTY**

Except as directed below, list all real property in which the debtor has any legal, equitable, or future interest, including all property owned as a cotenant, community property, or in which the debtor has a life estate. Include any property in which the debtor holds rights and powers exercisable for the debtor's own benefit. If the debtor is married, state whether husband, wife, both, or the marital community own the property by placing an "H," "W," "J," or "C" in the column labeled "Husband, Wife, Joint, or Community." If the debtor holds no interest in real property, write "None" under "Description and Location of Property."

Do not include interests in executory contracts and unexpired leases on this schedule. List them in Schedule G - Executory Contracts and Unexpired Leases.

If an entity claims to have a lien or hold a secured interest in any property, state the amount of the secured claim. See Schedule D. If no entity claims to hold a secured interest in the property, write "None" in the column labeled "Amount of Secured Claim." If the debtor is an individual or if a joint petition is filed, state the amount of any exemption claimed in the property only in Schedule C - Property Claimed as Exempt.

Current Value of Husband, Debtor's Interest in Wife, Joint, or Nature of Debtor's Amount of Description and Location of Property Property, without Interest in Property Secured Claim Deducting any Secured Community Claim or Exemption **Tenancy by Entireties** J 90,000.00 175,760.95 **Residential Real Estate** Location: 8525 Vasel Ave, Saint Louis MO

Sub-Total >

90,000.00

(Total of this page)

Total >

90,000.00

In re	Bruce Edwin Hopson
	Linda Kathryn Honso

Debtors

#### SCHEDULE B - PERSONAL PROPERTY

Except as directed below, list all personal property of the debtor of whatever kind. If the debtor has no property in one or more of the categories, place an "x" in the appropriate position in the column labeled "None." If additional space is needed in any category, attach a separate sheet properly identified with the case name, case number, and the number of the category. If the debtor is married, state whether husband, wife, both, or the marital community own the property by placing an "H," "W," "J," or "C" in the column labeled "Husband, Wife, Joint, or Community." If the debtor is an individual or a joint petition is filed, state the amount of any exemptions claimed only in Schedule C - Property Claimed as Exempt.

Do not list interests in executory contracts and unexpired leases on this schedule. List them in Schedule G - Executory Contracts and Unexpired Leases.

If the property is being held for the debtor by someone else, state that person's name and address under "Description and Location of Property." If the property is being held for a minor child, simply state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m).

	Type of Property	N O N Description and Location of Property E	Husband, Wife, Joint, or Community	Current Value of Debtor's Interest in Property, without Deducting any Secured Claim or Exemption
1.	Cash on hand	Cash on hand	J	17.00
2.	Checking, savings or other financial accounts, certificates of deposit, or shares in banks, savings and loan, thrift, building and loan, and homestead associations, or credit	St. Louis Community Credit Union; Checking account #8007 3651 Forest Park Avenue St. Louis, MO 63108	w	706.84
	unions, brokerage houses, or cooperatives.	E-Trade Bank; Checking account #1577	J	43.44
	Cooperatives	E-Trade Bank; Savings account #3601	J	1,443.24
		Eagle Bank; Checking account #0035 *Son's custodial account Eagle Bank 10596 Highway 21 P.O. Box 680 Hillsboro, MO 63050-0680	J	104.97
		Southwest Bank; Business savings account #5969 P.O. Box 790050 St. Louis, MO 63179-0050	J	0.00
		US Bank; Savings account #0819 P.O. Box 1800 Saint Paul, MN 55101-0000	J	4.00
		E-Trade Bank; Savings account #6619	J	138.92
3.	Security deposits with public utilities, telephone companies, landlords, and others.	x		
4.	Household goods and furnishings, including audio, video, and computer equipment.	Household goods and furnishings Location: 8525 Vasel Ave, Saint Louis MO	J	2,125.00
5.	Books, pictures and other art objects, antiques, stamp, coin, record, tape, compact disc, and other collections or collectibles.	Books-\$50.00 Pictures and Wall-hangings-\$10.00 CD's-\$100.00 Location: 8525 Vasel Ave, Saint Louis MO	J	160.00
			Sub-Tot	al > <b>4,743.41</b>

**<sup>3</sup>** continuation sheets attached to the Schedule of Personal Property

(Total of this page)

In re	Bruce Edwin Hopson,
	Linda Kathryn Hopson

### Debtors

### **SCHEDULE B - PERSONAL PROPERTY**

(Continuation Sheet)

	Type of Property	N O Description and Location of Property E	Husband, Wife, Joint, or Community	Current Value of Debtor's Interest in Property, without Deducting any Secured Claim or Exemption
6.	Wearing apparel.	Clothing and wearing apparel Location: 8525 Vasel Ave, Saint Louis MO	J	300.00
7.	Furs and jewelry.	Wedding set Location: 8525 Vasel Ave, Saint Louis MO	J	750.00
		Other jewelry Location: 8525 Vasel Ave, Saint Louis MO	J	50.00
8.	Firearms and sports, photographic, and other hobby equipment.	.410 Shotgun Location: 8525 Vasel Ave, Saint Louis MO	н	50.00
		Misc sports equipment-\$25.00 Video camera-\$200.00 Location: 8525 Vasel Ave, Saint Louis MO	J	225.00
		Camera Location: 8525 Vasel Ave, Saint Louis MO	W	5.00
9.	Interests in insurance policies. Name insurance company of each policy and itemize surrender or refund value of each.	X		
10.	Annuities. Itemize and name each issuer.	х		
11.	Interests in an education IRA as defined in 26 U.S.C. § 530(b)(1) or under a qualified State tuition plan as defined in 26 U.S.C. § 529(b)(1). Give particulars. (File separately the record(s) of any such interest(s). 11 U.S.C. § 521(c).)	X		
12.	Interests in IRA, ERISA, Keogh, or other pension or profit sharing plans. Give particulars.	x		
13.	Stock and interests in incorporated and unincorporated businesses. Itemize.	Piper-Jaffray Stock; One share common stock; Trading at approximately \$30.00.	Н	30.00
14.	Interests in partnerships or joint ventures. Itemize.	x		
15.	Government and corporate bonds and other negotiable and nonnegotiable instruments.	United States Savings Bonds *Four \$50.00 savings bonds for child; Unmature	J d	250.00

Sub-Total > 1,660.00 (Total of this page)

Sheet <u>1</u> of <u>3</u> continuation sheets attached to the Schedule of Personal Property

In re	Bruce Edwin Hopson, Linda Kathryn Hopson		
-	, ., .,	Debtors	,

Case No.

### **SCHEDULE B - PERSONAL PROPERTY**

	(Continuation Sheet)						
	Type of Property	N O N E	Description and Location of Property	Husband, Wife, Joint, or Community	Current Value of Debtor's Interest in Property, without Deducting any Secured Claim or Exemption		
16.	Accounts receivable.	Х					
17.	Alimony, maintenance, support, and property settlements to which the debtor is or may be entitled. Give particulars.	X					
18.	Other liquidated debts owed to debtor including tax refunds. Give particulars.	X					
19.	Equitable or future interests, life estates, and rights or powers exercisable for the benefit of the debtor other than those listed in Schedule A - Real Property.	X					
20.	Contingent and noncontingent interests in estate of a decedent, death benefit plan, life insurance policy, or trust.	X					
21.	Other contingent and unliquidated claims of every nature, including tax refunds, counterclaims of the debtor, and rights to setoff claims. Give estimated value of each.		Possible personal injury lawsuit from slip and fall accident at Sam's Club	W	0.00		
22.	Patents, copyrights, and other intellectual property. Give particulars.	X					
23.	Licenses, franchises, and other general intangibles. Give particulars.	X					
24.	Customer lists or other compilations containing personally identifiable information (as defined in 11 U.S.C. § 101(41A)) provided to the debtor by individuals in connection with obtaining a product or service from the debtor primarily for personal, family, or household purposes.	X					
25.	Automobiles, trucks, trailers, and other vehicles and accessories.		1998 Dodge Caravan; Mileage: 110,800 Location: 8525 Vasel Ave, Saint Louis MO	J	2,000.00		
			1997 Chevy Lumina; Mileage: 111,000 Location: 8525 Vasel Ave, Saint Louis MO	н	1,500.00		
			(Tota	Sub-Total of this page)	al > 3,500.00		

Sheet **2** of **3** continuation sheets attached to the Schedule of Personal Property

In re	Bruce Edwin Hopson,
	Linda Kathryn Hopsoi

Case No.

#### Debtors

### **SCHEDULE B - PERSONAL PROPERTY**

(Continuation Sheet)

Type of Property	N O Description and Location of Property E	Husband, Wife, Joint, or Community	Current Value of Debtor's Interest in Property, without Deducting any Secured Claim or Exemption
26. Boats, motors, and accessories.	x		
27. Aircraft and accessories.	x		
28. Office equipment, furnishings, and supplies.	x		
29. Machinery, fixtures, equipment, and supplies used in business.	8'x10' Trade Show Display  *To be surrendered in bankruptcy	J	1,000.00
30. Inventory.	x		
31. Animals.	x		
32. Crops - growing or harvested. Give particulars.	x		
33. Farming equipment and implements.	x		
34. Farm supplies, chemicals, and feed.	x		
35. Other personal property of any kind not already listed. Itemize.	x		

Sub-Total > 1,000.00 (Total of this page)

Total > 10,903.41

Sheet <u>3</u> of <u>3</u> continuation sheets attached to the Schedule of Personal Property

In re

Bruce Edwin Hopson, Linda Kathryn Hopson

euse 110:

Debtors

### SCHEDULE C - PROPERTY CLAIMED AS EXEMPT

Debtor claims the exemptions to which debtor is entitled under:	☐ Check if debtor claims a homestead exemption that exceeds
(Check one box)	\$136,875.
☐ 11 U.S.C. §522(b)(2)	
■ 11 U.S.C. §522(b)(3)	

Description of Property	Specify Law Providing Each Exemption	Value of Claimed Exemption	Current Value of Property Without Deducting Exemption
Real Property Residential Real Estate Location: 8525 Vasel Ave, Saint Louis MO	RSMo § 513.475	15,000.00	90,000.00
Cash on Hand Cash on hand	RSMo § 513.430.1(3)	17.00	17.00
Checking, Savings, or Other Financial Accounts, St. Louis Community Credit Union; Checking account #8007 3651 Forest Park Avenue St. Louis, MO 63108	Certificates of Deposit RSMo § 513.430.1(3)	706.84	706.84
E-Trade Bank; Checking account #1577	RSMo § 513.430.1(3)	43.44	43.44
E-Trade Bank; Savings account #3601	RSMo § 513.430.1(3) RSMo § 513.440	52.72 1,390.52	1,443.24
Eagle Bank; Checking account #0035 *Son's custodial account Eagle Bank 10596 Highway 21 P.O. Box 680 Hillsboro, MO 63050-0680	RSMo § 513.430.1(3) RSMo § 513.440	100.00 4.97	104.97
Southwest Bank; Business savings account #5969 P.O. Box 790050 St. Louis, MO 63179-0050	RSMo § 513.430.1(3)	0.00	0.00
US Bank; Savings account #0819 P.O. Box 1800 Saint Paul, MN 55101-0000	RSMo § 513.440	4.00	4.00
E-Trade Bank; Savings account #6619	RSMo § 513.440	138.92	138.92
<u>Household Goods and Furnishings</u> Household goods and furnishings Location: 8525 Vasel Ave, Saint Louis MO	RSMo § 513.430.1(1)	2,125.00	2,125.00
Books, Pictures and Other Art Objects; Collectible Books-\$50.00 Pictures and Wall-hangings-\$10.00 CD's-\$100.00 Location: 8525 Vasel Ave, Saint Louis MO	<u>es</u> RSMo § 513.430.1(1)	160.00	160.00
Wearing Apparel Clothing and wearing apparel Location: 8525 Vasel Ave, Saint Louis MO	RSMo § 513.430.1(1)	300.00	300.00

\_\_\_\_ continuation sheets attached to Schedule of Property Claimed as Exempt

In re	Bruce Edwin Hopson,
	Linda Kathryn Hopsor

Case No.	

### Debtors

### SCHEDULE C - PROPERTY CLAIMED AS EXEMPT

(Continuation Sheet)

Description of Property	Specify Law Providing Each Exemption	Value of Claimed Exemption	Current Value of Property Without Deducting Exemption
Furs and Jewelry Wedding set Location: 8525 Vasel Ave, Saint Louis MO	RSMo § 513.430.1(2)	750.00	750.00
Other jewelry Location: 8525 Vasel Ave, Saint Louis MO	RSMo § 513.430.1(2)	50.00	50.00
Firearms and Sports, Photographic and Other Hob .410 Shotgun Location: 8525 Vasel Ave, Saint Louis MO	<u>by Equipment</u> RSMo § 513.430.1(1)	50.00	50.00
Misc sports equipment-\$25.00 Video camera-\$200.00 Location: 8525 Vasel Ave, Saint Louis MO	RSMo § 513.430.1(1)	225.00	225.00
Camera Location: 8525 Vasel Ave, Saint Louis MO	RSMo § 513.430.1(1)	5.00	5.00
<u>Stock and Interests in Businesses</u> Piper-Jaffray Stock; One share common stock; Trading at approximately \$30.00.	RSMo § 513.430.1(3)	30.00	30.00
Government & Corporate Bonds, Other Negotiable United States Savings Bonds *Four \$50.00 savings bonds for child; Unmatured	& Non-negotiable Inst. RSMo § 513.430.1(3)	250.00	250.00
Automobiles, Trucks, Trailers, and Other Vehicles 1998 Dodge Caravan; Mileage: 110,800 Location: 8525 Vasel Ave, Saint Louis MO	RSMo § 513.430.1(5)	3,000.00	2,000.00
1997 Chevy Lumina; Mileage: 111,000 Location: 8525 Vasel Ave, Saint Louis MO	RSMo § 513.430.1(5)	3,000.00	1,500.00

Total: 27,403.41 99,903.41 In re

Bruce Edwin Hopson, Linda Kathryn Hopson

**Debtors** 

#### SCHEDULE D - CREDITORS HOLDING SECURED CLAIMS

State the name, mailing address, including zip code, and last four digits of any account number of all entities holding claims secured by property of the debtor as of the date of filing of the petition. The complete account number of any account the debtor has with the creditor is useful to the trustee and the creditor and may be provided if the debtor chooses to do so. List creditors holding all types of secured interests such as judgment liens, garnishments, statutory liens, mortgages, deeds of trust, and other security interests.

other security interests.

List creditors in alphabetical order to the extent practicable. If a minor child is a creditor, the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m). If all secured creditors will not fit on this page, use the continuation sheet provided.

If any entity other than a spouse in a joint case may be jointly liable on a claim, place an "X" in the column labeled "Codebtor", include the entity on the appropriate schedule of creditors, and complete Schedule H - Codebtors. If a joint petition is filed, state whether the husband, wife, both of them, or the marital community may be liable on each claim by placing an "H", "W", "J", or "C" in the column labeled "Husband, Wife, Joint, or Community".

If the claim is contingent, place an "X" in the column labeled "Contingent". If the claim is unliquidated, place an "X" in the column labeled "Unliquidated". If the claim is disputed, place an "X" in the column labeled "Unliquidated". (You may need to place an "X" in more than one of these three columns.)

Total the columns labeled "Amount of Claim Without Deducting Value of Collateral" and "Unsecured Portion, if Any" in the boxes labeled "Total(s)" on the last sheet of the completed schedule. Report the total from the column labeled "Unsecured Portion" on the Statistical Summary of Schedules and, if the debtor is an individual with primarily consumer debts, report the total from the column labeled "Unsecured Portion" on the Statistical Summary of Certain Liabilities and Related Data.

Check this box if debtor has no creditors holding secured claims to report on this Schedule D.

Check this box if debtor has no creditors holding secured claims to report on this Schedule D.

CREDITOR'S NAME AND MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	C O D E B T O R	A H M	DATE CLAIM WAS INCURRED, NATURE OF LIEN, AND DESCRIPTION AND VALUE OF PROPERTY SUBJECT TO LIEN	COXT _ ZGEZ	DRLLGULDAH	DISPUTED	AMOUNT OF CLAIM WITHOUT DEDUCTING VALUE OF COLLATERAL	UNSECURED PORTION, IF ANY
Account No. xxxxxxx4664			1990	Т	TED			
Citimortgage 1000 Technology Dr O'Fallon, MO 63368-2240		J	Deed of Trust - First Mortgage  Residential Real Estate  Location: 8525 Vasel Ave, Saint Louis  MO		ט			
	L		Value \$ 90,000.00				55,547.95	0.00
Account No. xAC-xx0762	1		1/2005					
King Commercial Coporation 10024 Office Center Avenue, Suite 150 Saint Louis, MO 63128		J	Purchase Money Security 8'x10' Trade Show Display *To be surrendered in bankruptcy					
			Value \$ 1,000.00	1			3,675.00	2,675.00
Account No. xxx-xx-0346	T		2000				,	,
Midwest Bank Center 2191 Lemay Ferry Road Saint Louis, MO 63125		J	Deed of Trust - Third Mortgage  Residential Real Estate  Location: 8525 Vasel Ave, Saint Louis  MO					
			Value \$ 90,000.00				110,000.00	85,760.95
Account No. xxxx-xxxx-xx0-002  US Bank Bankruptcy Department PO Box 5229 Cincinnati, OH 45201-5229		J	1995  Deed of Trust - Second Mortgage  Residential Real Estate  Location: 8525 Vasel Ave, Saint Louis MO					
			Value \$ 90,000.00	1			10,213.00	0.00
continuation sheets attached			(Total of	Subt		·	179,435.95	88,435.95
			(Report on Summary of S	_	ota lule	·	179,435.95	88,435.95

n	re

Bruce Edwin Hopson, Linda Kathryn Hopson

Debtors

#### SCHEDULE E - CREDITORS HOLDING UNSECURED PRIORITY CLAIMS

A complete list of claims entitled to priority, listed separately by type of priority, is to be set forth on the sheets provided. Only holders of unsecured claims entitled to priority should be listed in this schedule. In the boxes provided on the attached sheets, state the name, mailing address, including zip code, and last four digits of the account number, if any, of all entities holding priority claims against the debtor or the property of the debtor, as of the date of the filing of the petition. Use a separate continuation sheet for each type of priority and label each with the type of priority.

The complete account number of any account the debtor has with the creditor is useful to the trustee and the creditor and may be provided if the debtor chooses to do so. If a minor child is a creditor, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m).

If any entity other than a spouse in a joint case may be jointly liable on a claim, place an "X" in the column labeled "Codebtor," include the entity on the appropriate schedule of creditors, and complete Schedule H-Codebtors. If a joint petition is filed, state whether the husband, wife, both of them, or the marital community may be liable on each claim by placing an "H," "W," "J," or "C" in the column labeled "Husband, Wife, Joint, or Community." If the claim is contingent, place an "X" in the column labeled "Contingent." If the claim is unliquidated, place an "X" in the column labeled "Unliquidated." If the claim is disputed, place an "X" in the column labeled "Disputed." (You may need to place an "X" in more than one of these three columns.)

Report the total of claims listed on each sheet in the box labeled "Subtotals" on each sheet. Report the total of all claims listed on this Schedule E in the box labeled "Total" on the last sheet of the completed schedule. Report this total also on the Summary of Schedules.

Report the total of amounts entitled to priority listed on each sheet in the box labeled "Subtotals" on each sheet. Report the total of all amounts entitled to priority listed on this Schedule E in the box labeled "Totals" on the last sheet of the completed schedule. Individual debtors with primarily consumer debts report this total also on the Statistical Summary of Certain Liabilities and Related Data.

Report the total of amounts <u>not</u> entitled to priority listed on each sheet in the box labeled "Subtotals" on each sheet. Report the total of all amounts not entitled to priority listed on this Schedule E in the box labeled "Totals" on the last sheet of the completed schedule. Individual debtors with primarily consumer debts report this total also on the Statistical Summary of Certain Liabilities and Related Data.
■ Check this box if debtor has no creditors holding unsecured priority claims to report on this Schedule E.
TYPES OF PRIORITY CLAIMS (Check the appropriate box(es) below if claims in that category are listed on the attached sheets)
☐ Domestic support obligations
Claims for domestic support that are owed to or recoverable by a spouse, former spouse, or child of the debtor, or the parent, legal guardian, or responsible relative of such a child, or a governmental unit to whom such a domestic support claim has been assigned to the extent provided in 11 U.S.C. § 507(a)(1).
☐ Extensions of credit in an involuntary case
Claims arising in the ordinary course of the debtor's business or financial affairs after the commencement of the case but before the earlier of the appointment of a trustee or the order for relief. 11 U.S.C. § 507(a)(3).
☐ Wages, salaries, and commissions
Wages, salaries, and commissions, including vacation, severance, and sick leave pay owing to employees and commissions owing to qualifying independent sales representatives up to \$10,950* per person earned within 180 days immediately preceding the filing of the original petition, or the cessation of business, whichever occurred first, to the extent provided in 11 U.S.C. § 507(a)(4).
☐ Contributions to employee benefit plans
Money owed to employee benefit plans for services rendered within 180 days immediately preceding the filing of the original petition, or the cessation of business whichever occurred first, to the extent provided in 11 U.S.C. § 507(a)(5).
☐ Certain farmers and fishermen
Claims of certain farmers and fishermen, up to \$5,400* per farmer or fisherman, against the debtor, as provided in 11 U.S.C. § 507(a)(6).
☐ Deposits by individuals
Claims of individuals up to \$2,425* for deposits for the purchase, lease, or rental of property or services for personal, family, or household use, that were not delivered or provided. 11 U.S.C. § 507(a)(7).
☐ Taxes and certain other debts owed to governmental units
Taxes, customs duties, and penalties owing to federal, state, and local governmental units as set forth in 11 U.S.C. § 507(a)(8).
☐ Commitments to maintain the capital of an insured depository institution
Claims based on commitments to the FDIC, RTC, Director of the Office of Thrift Supervision, Comptroller of the Currency, or Board of Governors of the Federal Reserve System, or their predecessors or successors, to maintain the capital of an insured depository institution. 11 U.S.C. § 507 (a)(9).
☐ Claims for death or personal injury while debtor was intoxicated
Claims for death or personal injury resulting from the operation of a motor vehicle or vessel while the debtor was intoxicated from using alcohol, a drug, or another substance. 11 U.S.C. § 507(a)(10).

**0** continuation sheets attached

<sup>\*</sup> Amounts are subject to adjustment on April 1, 2010, and every three years thereafter with respect to cases commenced on or after the date of adjustment.

•	
In re	Bruce Edwin Hopson,
	Linda Kathryn Hopsor

Case No.		

Debtors

#### SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS

State the name, mailing address, including zip code, and last four digits of any account number, of all entities holding unsecured claims without priority against the debtor or the property of the debtor, as of the date of filing of the petition. The complete account number of any account the debtor has with the creditor is useful to the trustee and the creditor and may be provided if the debtor chooses to do so. If a minor child is a creditor, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m). Do not include claims listed in Schedules D and E. If all creditors will not fit on this page, use the continuation sheet provided.

If any entity other than a spouse in a joint case may be jointly liable on a claim, place an "X" in the column labeled "Codebtor," include the entity on the appropriate schedule of creditors, and complete Schedule H - Codebtors. If a joint petition is filed, state whether the husband, wife, both of them, or the marital community may be liable on each claim by placing an "H," "W," "J," or "C" in the column labeled "Husband, Wife, Joint, or Community."

If the claim is contingent, place an "X" in the column labeled "Contingent." If the claim is unliquidated, place an "X" in the column labeled "Unliquidated." If the claim is disputed, place an "X" in the column labeled "Disputed." (You may need to place an "X" in more than one of these three columns.)

Report the total of all claims listed on this schedule in the box labeled "Total" on the last sheet of the completed schedule. Report this total also on the Summary of Schedules and, if the debtor is an individual with primarily consumer debts, report this total also on the Statistical Summary of Certain Liabilities and Related Data.

☐ Check this box if debtor has no creditors holding unsecured claims to report on this Schedule F.

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	СОДШВНОК	H W J C	sband, Wife, Joint, or Community  DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.	N L L Z G	HYD-CD-LZC	S P U T F	)  -  -	AMOUNT OF CLAIM
Account No. xx6370			1/2009	Ť	TED			
Accent Urology c/o Regional Credit Services 1201 Jefferson St, Ste 150 Washington, MO 63090-4453		W	Collection Account		D			328.00
Account No. xxxx-xxxx-x991	П		Balance as of 4/2000	Г	Г	T	1	
AKC Cocker Spaniel c/o Unifun CCR Partners 10625 Techwood Circle Cincinnati, OH 45242		W	Collection Account; Originally opened in 7/2004; 70% business debt and 30% personal debt.					44,074.00
Account No. xxxx-xxxxxx-x1003	$\vdash$		Balance as of 5/2006	H	H	H	$^{+}$	
American Express PO Box 7863 Fort Lauderdale, FL 33329-7863		Н	Revolving Charge Account; Account originally opened in 1990s; 80% business debt and 20% personal debt.					2,100.63
Account No. xxxxxxxx2426xxxx	Н		Balance as of 12/2008	⊢	H	╀	+	2,100100
American Express PO Box 7863 Fort Lauderdale, FL 33329-7863		Н	Revolving Charge Account; Account originally opened in the 1990s; 80% business debt and 20% personal debt.					13.175.00
	Ш			<u></u>		L	+	
			(Total of t	Subt his 1			,	59,677.63

In re	Bruce Edwin Hopson,	Case No.
	Linda Kathryn Hopson	

	1 -			-	1.	1 -	1
CREDITOR'S NAME,	C	Hu	usband, Wife, Joint, or Community	Co	U		
MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	C O D E B T O R	C A M		NT L NG EN	L Q U	U T	AMOUNT OF CLAIM
Account No. xxxxxxxxxxxxxx1041	┢	H	Balance as of 3/2007	₹ T	ΙT		
American Express PO Box 7863 Fort Lauderdale, FL 33329-7863		w	Revolving Charge Account; Originally opened in 2/1995; 100% business debt.		ED		11,733.00
Account No. xxxxxxxx9630	t	H	Balance as of 6/2009	t	t	$\vdash$	
American Express Business Finance Corp. 600 Travis St, Ste 1300 Houston, TX 77002		w	Revolving Charge Account; Account originaly opened in 9/2002; 100% business debt.				21,773.20
Account No. xxx1566	T		Balance as of 1/2009	T	T		
AT & T c/o Collection Company of America 700 Longwater Drive Norwell, MA 02061-1624		н	Collection Account				231.00
Account No. <b>xx2016</b>	t		Balance as of 2/2009	T	t	T	
AT & T Mobility c/o Afni Inc Bankruptcy Department PO Box 3427 Bloomington, IL 61702-3427		н	Collection Account				64.00
Account No. xxxxxxxx6910	T	T	Balance as of 11/2003	T		T	
BAC/FLeet Bankcard 200 Tournament Drive Horsham, PA 19044		н	Revolving Charge Account; Account originally opened in the 1990s; 100% business debt.				46 207 00
							16,397.00
Sheet no1 of _17_ sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims			(Total of	Sub his			50,198.20

In re	Bruce Edwin Hopson,	Case No.
	Linda Kathryn Hopson	

CREDITOR'S NAME,	С	Hu	sband, Wife, Joint, or Community	C	U	D	
MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	CODEBTOR	C A M	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.	ONTINGEN	N L I Q U I D A	I S P U T E D	AMOUNT OF CLAIM
Account No. xxxx xxxx xxxx 9208			Balance as of 6/2008	Т	A T E D		
Bank of America c/o Gerald E Moore & Associates PO Box 723548 Atlanta, GA 31139		Н	Revolving Charge Account; Account originally opened in the 1990s; 100% business debt.		D		21,603.43
Account No. xxxxxxxx9304xxxx			Balance as of 2/2003				
Bank of America PO Box 15026 Wilmington, DE 19850-5026		J	Revolving Charge Account; Account originally opened in the 1990s; 100% business debt.				12,218.00
Account No. xxxxxxxx0125xxxx			Balance as of 3/2003		T		
Bank of America PO Box 15026 Wilmington, DE 19850-5026		J	Revolving Charge Account; Originally opened in 5/1997; 100% business debt.				27,453.00
Account No. x8627			9/2006		Г		
Barry Witton, LLC 621 South New Ballas Rd, Ste 2002 B Saint Louis, MO 63141		Н	Medical Services				3,600.00
Account No. xxxxxxxx0092			Balance as of 5/2003		Т	T	
BP Cardmember Services PO Box 94014 Palatine, IL 60094-4014		J	Revolving Charge Account; Originally opened in 9/1994; 90% business debt and 10% personal debt				10,770.00
Sheet no. 2 of 17 sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims			S (Total of th		tota pag		75,644.43

In re	Bruce Edwin Hopson,	Case No.
	Linda Kathryn Hopson	

		Lles	shood Wife Isiat or Community		U	ь	
CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	CODEBTOR	H & J C	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.	l z G	N L Q U L	DISPUTED	AMOUNT OF CLAIM
Account No. xxxxxxxxxxxxx0140			Balance as of 4/2009	Т	D A T E D		
CACV of Colorado 370 17th St Ste 5000 Denver, CO 80202		Н	Collection Account		ט		18,376.00
Account No. xxAC xx5234	H		6/2005				
CACV of Colorado c/o St. Louis County Court 7900 Carondelet Saint Louis, MO 63105		W	Judgement Lien				347.00
Account No. xxAC-xx6997  CACV of Colorado, LLC c/o Gamache & Myers PC 1000 Camera Ave Suite A Saint Louis, MO 63126		w	7/2006 Collection account; Lawsuit 06AC-026997				9,216.32
Account No. xxxxxxxx4688xxxx			Balance as of 1/2005				
Capital One Bankruptcy Correspondence PO Box 5155 Norcross, GA 30091			Revolving Charge Account; Originally opened in 11/2000; 80% business debt and 20% personal debt				7,443.00
Account No. xxxx3673	$\vdash$		10/2008		$\dashv$		•
CashNetUsa.Com 200 W Jackson Blvd 14th Fl Chicago, IL 60606-6941		н	Cash Loan				611.63
Sheet no. <b>3</b> of <b>17</b> sheets attached to Schedule of			S	ubt	otal	l	05.000.05
Creditors Holding Unsecured Nonpriority Claims			(Total of th	nis p	oag	e)	35,993.95

In re	Bruce Edwin Hopson,	Case No.
	Linda Kathryn Hopson	

CDEDITORIC NAME	С	Hu	sband, Wife, Joint, or Community	С	U	D	T	
CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	C O D E B T O R	J H H	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.	F	UNLIQUIDA	ľ	: 1	AMOUNT OF CLAIM
Account No. xxxx7998			Balance as of 8/2002	T	A T E D			
Charter Advertising St. Louis 3660 South Geyer Rd, Ste 250 Saint Louis, MO 63127		н	Advertising Service; 100% business debt.		D			1,399.98
Account No. xx-xx-xxxx-xxxxxx01-00			Balance as of 4/2009	П		Г	T	
Charter Communications c/o Credit Protection Association 13355 Noel Road Ste 2100 Attn: Bankruptcy Department Dallas, TX 75240		н	Collection Account					126.11
Account No. xxxx-xxxx-8045	t		Balance as of 4/2003	$\forall$	H	H	$^{+}$	
Chase PO Box 15298 Wilmington, DE 19850-5298		н	Revolving Charge Account; Originally opened in 9/1995; 100% business debt.					14,919.00
Account No. xxxx-xxxx-xxxx-0289	t		Balance as of 7/2006	$\forall$	Г	T	T	
Chase c/o Creditors Financial Group PO Box 440290 Aurora, CO 80044		н	Collection Account					10,972.73
Account No. xxxx-xxxx-4495	t	H	Balance as of 3/2003	$\forall$	$\vdash$	T	+	
Chase PO Box 15298 Wilmington, DE 19850-5298		w	Revolving Charge Account; Originally opened in 6/1997; 80% business debt and 20% personal debt					5,935.00
Sheet no. 4 of 17 sheets attached to Schedule of				Subt	tota	l	T	00.050.00
Creditors Holding Unsecured Nonpriority Claims			(Total of t	his j	pag	ţe)	Ĺ	33,352.82

In re	Bruce Edwin Hopson,	Case No.
	Linda Kathryn Hopson	

	٦,	1				Te	1
CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	CODEBTOR	H W J C	sband, Wife, Joint, or Community  DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.	CONTINGEN	L	I S P U T	AMOUNT OF CLAIM
Account No. xxx377A1  Chase Manhattan Bank c/o Hudson & Keyes LLC 362 Blackbrook Road Painesville, OH 44077		н	Balance as of 5/2009 Collection Account; Originally opened in 9/2004; 100% business debt.		T E D		14,835.00
Account No. xxx9446  Cingular Wireless c/o Nationwide Recovery Systems 2304 Tarpley Rd Ste 134 Carrollton, TX 75006-2467		Н	Balance as of 1/2006 Collection Account				76.00
Account No. xxxx-xxxx-xxxx-5768  Citi Cards c/o Northland Group Inc PO Box 390905 Minneapolis, MN 55439		v	Balance as of 5/2009 Collection Account; Revolving account originally opened in 1995; 100% business debt.				6,336.13
Account No. xxxx-xxxx-2132  Citi Cards PO Box 6000 (customer service - credit cards) The Lakes, NV 89163-6000		Н	Balance as of 12/2004 Revolving Charge Account; Originally opened in 5/1994; 100% business debt.				8,700.00
Account No. xxxxxx4597  Citi Cards c/o Midland Credit Managment Bankruptcy Department 8875 Aero Dr Ste 200 San Diego, CA 92123		v	Balance as of 4/2009 Collection Account				7,712.00
Sheet no. <u>5</u> of <u>17</u> sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims	-	_	(Total o	Sub			37,659.13

In re	Bruce Edwin Hopson,	Case No.
	Linda Kathryn Hopson	

CDEDITOR'S NAME	С	Hu	sband, Wife, Joint, or Community	С	U	D		
CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	CODEBTOR	J H	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.	CONTINGENT	UNLIQUIDA	1 =		AMOUNT OF CLAIM
Account No. xxxxxxxx6620xxxx			Balance as of 5/2009	Ť	A T E D			
Citi Cards PO Box 6000 The Lakes, NV 89163-6000		J	Revolving Charge Account; Originally opened in 12/2001; 100% business debt.		ם		-	12,203.00
Account No. xxxxx1519			12/2008					
Des Peres Hosptial Attn: Patient Accounts Department 2345 Dougherty Ferry Rd. Saint Louis, MO 63122		w	Medical Services (as a result of slip and fall accident)					61,946.60
Account No. xxxx0524	┢		12/2008	<del>                                     </del>	$\vdash$	┢	+	
Dianon c/o LCA Collections PO Box 2240 Burlington, NC 27216-2240		w	Medical Services					180.00
Account No. xxxx-xxxx-xxxx-2538			Balance as of 7/2009				1	
Discover c/o National Action Financial Svcs 165 Lawrence Bell Dr Ste 100 PO Box 9027 Williamsville, NY 14231-9027		н	Collection Account; Originally opened in 11/1986; 100% business debt.					4,834.02
Account No. xxAC-xx1021			7/2005		Г	T	T	
Discover c/o Office of the Sheriff 7900 Carondelet Ave Saint Louis, MO 63105		w	Lawsuit					11,191.00
Sheet no. 6 of 17 sheets attached to Schedule of	_	I		Subt	ota	1	+	
Creditors Holding Unsecured Nonpriority Claims			(Total of t					90,354.62

In re	Bruce Edwin Hopson,	Case No.
	Linda Kathryn Hopson	

CREDITOR'S NAME,	CO	Нι	usband, Wife, Joint, or Community	CON	UNLI	D I S P	
MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	CODEBTOR	C J M	CONSIDERATION FOR CLAIM. IF CLAIM	NTINGENT	Q U I	T E	AMOUNT OF CLAIM
Account No. xxx-xx-6719			7/2006	Т	D A T E D		
Dr Lester Reese c/o Midwest Support Services PO Box 1706 Saint Peters, MO 63376		W	Medical Services		D		2,419.00
Account No. XXX-XX-0346			9/2002				
Embroid Me 1801 Australian Avenue South West Palm Beach, FL 33409		н	Business loan / Franchise Fees; 100% business debt.			x	10,000.00
Account No. 6093	⊢	H	9/2008	+		$\vdash$	,
Esse Health PO Box 23340 Saint Louis, MO 63156-3340		W	Medical Services				680.00
Account No. xx8103			7/2006				
Esse Health c/o Account Resolution Corp PO Box 3860 Chesterfield, MO 63006-3860		н	Collection Account				354.24
Account No. xx7615	Г	T	3/2006	T			
Esse Health PO Box 23340 Saint Louis, MO 63156-3340		Н	Medical Services				110.57
Sheet no7 of _17_ sheets attached to Schedule of				Sub	tota	ıl	13,563.81
Creditors Holding Unsecured Nonpriority Claims			(Total of t	his	pag	ge)	10,000.01

In re	Bruce Edwin Hopson,	Case No.
	Linda Kathryn Hopson	

	_	_		_	_	_	1
CREDITOR'S NAME,	C	Hu	usband, Wife, Joint, or Community	15	U	ΙP	
MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	CODEBTOR	C A M	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.	CONTINGENT	LIQUIDATED	DISPUTED	AMOUNT OF CLAIM
Account No. xx8103			3/2006	T	ΙE		
Esse Health PO Box 23340 Saint Louis, MO 63156-3340		н	Medical Services		D		288.00
Account No. xx7615	l		2/2006				
Esse Health PO Box 23340 Saint Louis, MO 63156-3340		н	Medical Services				210.57
Account No. 6093			12/2005	T		T	
Esse Health PO Box 23340 Saint Louis, MO 63156-3340		w	Medical Services				29.00
Account No. xx8103			10/2005	Г			
Esse Health PO Box 23340 Saint Louis, MO 63156-3340		н	Medical Services				311.00
Account No. xxx6605		H	5/2009	T	H	T	
Esse Health c/o Account Resolution Corp 17600 Chesterfield Airport Road Chesterfield, MO 63005		w	Medical Services				836.00
Sheet no. <b>8</b> of <b>17</b> sheets attached to Schedule of			5	Subt	tota	1	4.07.1-
Creditors Holding Unsecured Nonpriority Claims			(Total of t	his	pag	ge)	1,674.57

In re	Bruce Edwin Hopson,
	Linda Kathryn Hopson

Case No.	

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE,	CODEBT	H W	DATE CLAIM WAS INCURRED AND	CONTI	UZLLQ	DISPUT	
AND ACCOUNT NUMBER (See instructions above.)	T O R	C	IS SUBJECT TO SETOFF, SO STATE.	N G E N T	UIDATED		AMOUNT OF CLAIM
Account No. xxxxxxxx1023xxxx	l		Balance as of 8/2003 Revolving Charge Account; Originally opened	'	Ė		
First USA Bank Dept. OH1-0552ATT 800 Brooksedge Blvd.		J	in 4/1996; 90% business debt and 10% personal debt				
Westerville, OH 43081-0552							6,557.00
Account No. xxxxxx9183			Balance as of 4/2009 Collection Account; Originally opened in				
Fleet Bank c/o Midland Credit Managment Bankruptcy Department 8875 Aero Dr Ste 200		Н	1993; 90% business debt and 10% personal				
San Diego, CA 92123							25,807.00
Account No. xxAC-xx5163			6/2005 Lawsuit; 100% business debt.				
Fortune Southfield Comapny, LLP c/o Robert W Paster 7733 Forsyth, Ste 2000 Saint Louis, MO 63105		J					
							20,948.00
FST Bankcard Center of Omaha PO Box 3412 Omaha, NE 68197		J	Balance as of 7/2005 Revolving Charge Account; Originally opened in 1999; 100% business debt.				
							16,664.00
Account No. xxxx-xxxx-xxxx-8106  Harris Bank c/o Unifund CCR Partners 10625 Techwoods Cir Cincinnati, OH 45242		W	Balance as of 4/2009 Collection Account; Originally opened in 7/2004; 100% business debt.				9,275.00
Shoot no. 0 of 17 shoots attached to Sale-July-f				2,,64	L	1	9,215.00
Sheet no. <b>9</b> of <b>17</b> sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims			(Total of t	Subt his			79,251.00

In re	Bruce Edwin Hopson,	Case No.
	Linda Kathryn Hopson	

	٦	1		1 -	1	1-	
CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	CODEBTOR	C H H	CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.	CONTINGEN	UNLIQUIDAT	DISPUTED	AMOUNT OF CLAIM
Account No. xxxxxxxxxxx2532	1		Balance as of 6/2009	'	ED		
Heartland Payment Systems c/o Commercial Services Group, Inc 11603 Shelbyville Rd, Ste 3 Louisville, KY 40243		W	Collection Account				160.24
Account No. x6266		T	Balance as of 1/2006	T			
International Credit Reserve Exchange 8061 Watson Rd, Ste 131 Saint Louis, MO 63119		н	Service; 100% business debt.				2,314.87
	┞			╀	_	_	2,314.07
Account No. xxxxxxx5864  M & I Bank c/o John Lee Jackson 1445 Langham Creek Drive Houston, TX 77084		н	Balance as of 7/2006 Collection Account				73.23
Account No. xxxxxxxx8101	t		Balance as of 12/2008	$^{+}$	t	t	
Macy's 9111 Duke Blvd Mason, OH 45040		W	Revolving Charge Account; Originally opened in 12/1987; 100% personal debt.				862.00
Account No. xxxx-xxxx-xxxx-8070	╁	$\vdash$	Balance as of 2/2009	+	$\vdash$	$\vdash$	
MBNA America Bank, NA c/o Portfolio Recovery Associates LLC 120 Corporate Blvd Ste 100 Norfolk, VA 23502	-	н	Collection Account; Originally opened in 1992; 100% business debt.				47,269.00
Sheet no10_ of _17_ sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims	-	<u> </u>	(Total of	Sub this			50,679.34

In re	Bruce Edwin Hopson,	Case No.
	Linda Kathryn Hopson	

	١.	1				1.	1
CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	CODEBTOR	C H H	CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.		Q U	I U	AMOUNT OF CLAIM
Account No. xxxx-xxxx-xxxx-7209			Balace as of 2/2009	T	E		
MBNA America Bank, NA c/o Portfolio Recovery Associates LLC 120 Corporate Blvd Ste 100 Norfolk, VA 23502		W	Collection Account; Originally opened in 1992; 100% business debt.				21,276.00
Account No. x4967			1/2009	T	T	T	
Med Resources 14805 N Outer 40 Road, Ste 100 Chesterfield, MO 63017		W	Medical Services				155.00
Account No. xxx261 1			3/2009	+	+	+	
Metro West Anesthesia Group PO Box 958864 Saint Louis, MO 63195-8864		W	Medical Services				2,001.00
Account No. xxxxAC-x3931	┞	_	11/2007	+	+	+	2,001.00
Midland Funding LLC C/O Irwin James Frankel, Esq. 9300 Dielman Industrial Drive Ste 100 Saint Louis, MO 63132		W	Lawsuit; 100% busines debt.				4,907.25
Account No. xxAC-xx8354	T	T	2/2009	$\dagger$	t	T	
MRC Recievables c/o JAmes W Murphy, Sheriff City of St. Louis 11 North 11th Street Saint Louis, MO 63101		н	Collection account.				800.00
Sheet no11 of17 sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims		•	(Total of	Sub			29,139.25

In re	Bruce Edwin Hopson,	Case No.
	Linda Kathryn Hopson	

l c	ш.	ushand Wife Joint or Community	٦,	: 111	Г	
ODEBTOR	н	DATE CLAIM WAS INCLIDED AND	I I N		I S P U T E D	
		12/2008	T	Ē		
	н			D		115.55
┢	H	1/2007	+	+	+	
	н	Medical Services				378.60
┢		10/2008	+	+	-	
•	w	Medical Services				502.25
╁		10/2008	+	+	+	
-	W	Medical services (as a result of slip and fall accident)				90,000.00
f	H	4/2005	+	+	+	
•	J	Lawsuit				4,700.27
-		(Total of				95,696.67
	CODEBTOR	H	H H 1/2007 Medical Services H 10/2008 Medical Services W 10/2008 Medical Services (as a result of slip and fall accident) W 4/2005 Lawsuit J	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.  12/2008 Medical Services H  10/2008 Medical Services W  10/2008 Medical Services W  4/2005 Lawsuit  Sull	CONSIDERATION FOR CLAIM IF CLAIM IS SUBJECT TO SETOFF, SO STATE.  12/2008 Medical Services  H  10/2008 Medical Services  W  10/2008 Medical Services  W  4/2005 Lawsuit  J  Subtot	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.  12/2008 Medical Services  H  1/2007 Medical Services  W  10/2008 Medical Services  W  4/2005 Lawsuit  J  A 7  T   0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0

In re	Bruce Edwin Hopson,	Case No.
	Linda Kathryn Hopson	

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	CODE	Г	band, Wife, Joint, or Community	C	U	I D	i
	οL	C J M	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.	COZH_ZGШZH	ZI_QU_DAFWD	U T E	AMOUNT OF CLAIM
Account No. xxxxxxxxxxxxx1199		- 1	Balance as of 6/2009 Student Loans		ED		
Sallie Mae PO Box 9500 Wilkes Barre, PA 18773-9500	,	w	Ottudent Loans				22,751.89
Account No. xxx x xx xxxxxx6252	$\dagger$	- 1	Balance as of 5/2009	Н		П	
Sam's Club GE Money Bank Attn: Bankruptcy Department PO Box 103104 Roswell, GA 30076			Revolving Charge Account; Originally opened in 8/2002; 100% personal debt.				93.18
Account No. xxxxxx0208	+	$\dashv$	5/2005	Н		Н	
St. Anthony's Medical Center c/o CACi PO Box 270480 Saint Louis, MO 63127-0480			Medical Services				160.80
Account No. xxxxxx0214	+	$\dashv$	6/2005	Н		$\vdash$	
St. Anthony's Medical Center c/o CACi PO Box 270480 Saint Louis, MO 63127-0480		н	Medical Services				107.20
Account No. xxxxxx1023	+	$\dashv$	1/2007	Н			
St. John's Mercy Medical Center c/o NCO Financial Systems Attn Bankruptcy Department PO Box 15636 Wilmington, DE 19850-5889		- 1	Medical Services				1,427.00
Sheet no13_ of _17_ sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims			S (Total of th	ubt nis p			24,540.07

In re	Bruce Edwin Hopson,	Case No.
	Linda Kathryn Hopson	

CREDITOR'S NAME,	С	Hu	sband, Wife, Joint, or Community	Ç	Ü	Ē	o T	
MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	СОПШВНОК	J C	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.	CONTINGEN	QULD	E	J Г Е	AMOUNT OF CLAIM
Account No. xxxxxx0040			10/2004	Т	A T E D		Γ	
St. Louis County Court 10 N Tucker Blvd Saint Louis, MO 63101		w	State Tax Lien		D			2,380.00
Account No. xxxxx4059			Balance as of 6/2009					
The Avenue c/o WFNNB Bankruptcy Department PO Box 182125		w	Revolving Charge Account;Originally opened in 1/2008					
Columbus, OH 43218-2125								199.51
Account No. x7987  Therapeutic & Diagnostic Imaging LLC PO Box 66726 Saint Louis, MO 63166-6726		w	12/2008 Medical Services					
								72.00
Account No. xx3781  Therapuetic & Diagnostic Imaging c/o Day Knight Associates PO Box 5 Grover, MO 63040		w	5/2009 Medical Services					79.32
Assessed No. 1990 Cl. ACM4407			0/2000	-	_	┞	+	
Account No. xxSL-ACx1197  TLJ Credit Corp/US Bank c/o Underwood Law Firm 515 Olive Street, Ste 800 Saint Louis, MO 63101		Н	8/2008 Lawsuit					8,740.88
Sheet no. <u>14</u> of <u>17</u> sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims			(Total of t		tota		$\int$	11,471.71
creations from any consecuted frompriority claims			(10111011)	-110	Put	5~)	′ L	

In re	Bruce Edwin Hopson,	Case No.
	Linda Kathryn Hopson	

Account No. xx4521xxxx  Account No. xx4521xxxx  Toyota Motor Credit 5005 N River Blvd NE Cedar Rapids, IA 52411  Account No. xxAC-xx5804  Unifund CCR Partners c/o William Francis Whealen 7606 Forsyth Blvd Saint Louis, MO 63105  Bala Account No. xxxx-xxxx-xxxx-5913  Bala Bala Bala Bala Bala Bala Bala	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.  DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.  DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.  DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.  DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.  DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.  DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.  DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.  DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.  DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IS SUBJECT TO SETOFF, SO STATE.  DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IS SUBJECT TO SETOFF, SO STATE.  DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IS SUBJECT TO SETOFF, SO STATE.  DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IS SUBJECT TO SETOFF, SO STATE.  DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IS SUBJECT TO SETOFF.  DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IS SUBJECT TO SETOFF.  DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IS SUBJECT TO SETOFF.  DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IS SUBJECT TO SETOFF.  DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IS SUBJECT TO SETOFF.  DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IS SUBJECT TO SETOFF.  DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IS SUBJECT TO SETOFF.  DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IS SUBJECT TO SETOFF.  DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IN CONSIDERATION F
INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)  Account No. xx4521xxxx  Toyota Motor Credit 5005 N River Blvd NE Cedar Rapids, IA 52411  Account No. xxAC-xx5804  Unifund CCR Partners c/o William Francis Whealen 7606 Forsyth Blvd Saint Louis, MO 63105  B w J J C C W J J C C C C C C C C C C C C C C C C C	T   D   D   D   D   D   D   D   D   D
Account No. xx4521xxxx  Toyota Motor Credit 5005 N River Blvd NE Cedar Rapids, IA 52411  Account No. xxAC-xx5804  Unifund CCR Partners c/o William Francis Whealen 7606 Forsyth Blvd Saint Louis, MO 63105  Bala  Account No. xxxx-xxxx-xxxx-5913	T   D   D   D   D   D   D   D   D   D
Account No. xx4521xxxx  Toyota Motor Credit 5005 N River Blvd NE Cedar Rapids, IA 52411  Account No. xxAC-xx5804  Unifund CCR Partners c/o William Francis Whealen 7606 Forsyth Blvd Saint Louis, MO 63105  Bala  Account No. xxxx-xxxx-xxxx-5913	T   D   D   D   D   D   D   D   D   D
Account No. xx4521xxxx  Toyota Motor Credit 5005 N River Blvd NE Cedar Rapids, IA 52411  Account No. xxAC-xx5804  Unifund CCR Partners c/o William Francis Whealen 7606 Forsyth Blvd Saint Louis, MO 63105  Bala  Account No. xxxx-xxxx-xxxx-5913	T   D   D   D   D   D   D   D   D   D
Account No. xxxx-xxxx-xxxx-5913  Auto  Auto  Auto  Auto  Auto  J  Auto  Auto  Auto  Auto  J  Auto  Auto  Auto  Auto  Auto  J  Auto  Auto  Auto  Account No. xxAC-xx5804  W  Account No. xxxAC-xx5804  W  Bala	T   T   E   D
Toyota Motor Credit 5005 N River Blvd NE Cedar Rapids, IA 52411  Account No. xxAC-xx5804  Unifund CCR Partners c/o William Francis Whealen 7606 Forsyth Blvd Saint Louis, MO 63105  Account No. xxxx-xxxx-xxxx-5913  Bala	24,386.0 7 ement Lien
5005 N River Blvd NE Cedar Rapids, IA 52411  Account No. xxAC-xx5804  Unifund CCR Partners c/o William Francis Whealen 7606 Forsyth Blvd Saint Louis, MO 63105  Account No. xxxx-xxxx-xxxx-5913  Bala	7 ement Lien 10,258.0
Cedar Rapids, IA 52411  Account No. xxAC-xx5804  Unifund CCR Partners c/o William Francis Whealen 7606 Forsyth Blvd Saint Louis, MO 63105  Account No. xxxx-xxxx-xxxx-5913  Bala	7 ement Lien 10,258.0
Account No. xxAC-xx5804  Unifund CCR Partners c/o William Francis Whealen 7606 Forsyth Blvd Saint Louis, MO 63105  Account No. xxxx-xxxx-xxxx-5913  Bala	7 ement Lien 10,258.0
Unifund CCR Partners c/o William Francis Whealen 7606 Forsyth Blvd Saint Louis, MO 63105  Account No. xxxx-xxxx-xxxx-5913  Bala	7 ement Lien 10,258.0
Unifund CCR Partners c/o William Francis Whealen 7606 Forsyth Blvd Saint Louis, MO 63105  Account No. xxxx-xxxx-xxxx-5913  Bala	7 ement Lien 10,258.0
Unifund CCR Partners c/o William Francis Whealen 7606 Forsyth Blvd Saint Louis, MO 63105  Account No. xxxx-xxxx-xxxx-5913  Bala	ement Lien 10,258.0
Unifund CCR Partners c/o William Francis Whealen 7606 Forsyth Blvd Saint Louis, MO 63105  Account No. xxxx-xxxx-xxxx-5913  Bala	10,258.0
Unifund CCR Partners c/o William Francis Whealen 7606 Forsyth Blvd Saint Louis, MO 63105  Account No. xxxx-xxxx-xxxx-5913  Bala	10,258.0
c/o William Francis Whealen 7606 Forsyth Blvd Saint Louis, MO 63105  Account No. xxxx-xxxx-5913  Bala	
7606 Forsyth Blvd Saint Louis, MO 63105  Account No. xxxx-xxxx-5913  Bala	
Account No. xxxx-xxxx-5913 Bala	
Account No. xxxx-xxxx-5913 Bala	
	ice as of 4/2009
ا ارمااه	
	ction Account
Unifund CCR Partners	
10625 Techwood Circle	
Cincinnati, OH 45242	
Ciricinnati, Off 43242	
	30,858.0
Account No. xxAC-xx3621 9/200	5
Judç	ement Lien
Unifund CCR Partners	
c/o Saint Louis	
10 N Tucker	
Saint Louis, MO 63101	
Sum 250.5,5 55151	5,934.
Account No. xxAC-xx0196 4/200	
	ction account; Revolving account
00 Dunii	nally opened in 1980s; 100% business
Bankruptcy Department J   debt	
PO Box 5229	
Cincinnati, OH 45201-5229	
'	10,818.3
Sheet no. <u>15</u> of <u>17</u> sheets attached to Schedule of	Subtotal
Creditors Holding Unsecured Nonpriority Claims	(Total of this page) 82,254.

In re	Bruce Edwin Hopson,	Case No.
	Linda Kathryn Hopson	

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CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	CODEBTOR	C H H	H //	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.	CONTLNGEN	UNLIQUIDAT	DISPUTED	AMOUNT OF CLAIM
Account No. xxx-xx-0346			- 1	Balance as of 7/2007	T	T E D		
US Bank c/o Underwood Law Firm 515 Olive Street, Ste 800 Saint Louis, MO 63101		н		Collection Account; Revolving account originally opened in 1980s; 100% business debt.				25,581.36
Account No. xx8280xxxx	t	t	7	Balance as of 5/2009	H	H	$\vdash$	
US Bank Bankruptcy Department PO Box 5229 Cincinnati, OH 45201-5229		J		Installment Account;Originally opened in 11/1996				2,782.00
Account No. xx2378xxxx		T		Balance as of 5/2009				
US Bank Bankruptcy Department PO Box 5229 Cincinnati, OH 45201-5229		н		Installment Account; Originally opened 1/1983				662.00
Account No. xxxxxxxx6099xxxx		t	$\dagger$	Balance as of 5/2009				
US Bank Bankruptcy Department PO Box 5229 Cincinnati, OH 45201-5229		н		Revolving Charge Account; Originally opened in 9/2001; 100% business debt.				13,143.00
Account No. xxxx-xxxx-1458	$\vdash$	t	+	Balance as of 2/2007		H	$\vdash$	
US Bank Bankruptcy Department PO Box 5229 Cincinnati, OH 45201-5229		н		Revolving Charge Account; Originally opened in 9/2001; 100% business debt.				11,554.00
					L		<u> </u>	11,554.00
Sheet no. <b>_16</b> _ of <b>_17</b> _ sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims				(Total of t	Sub his			53,722.36

In re	Bruce Edwin Hopson,	Case No.
	Linda Kathryn Hopson	

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)  Account No. xxAC-xx2539	CODEBTOR	Hu Hu	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.  1/2005 Judgement Lien	COZHLZGEZH	N L I Q	T E C	J [	AMOUNT OF CLAIM
US Bank c/o St. Louis County Association 7900 Carondelet Ave Saint Louis, MO 63105		н						7,601.00
Account No. xxxx-xxxx-xxxx-5273  Wachovia PO Box 99604 Arlington, TX 76096-9604	-	w	Balance as of 4/2009 Revolving Charge Account; Revolving account originally opened in 1992; 100% business debt.					
Account No. 4521  WCP Laboratories Inc PO Box 60013 Saint Louis, MO 63160	-	w	4/2009 Medical Services					22,508.00
Account No. xxxxxx1859  West County Radiology Group 555 North New Ballas Road Ste 150 Saint Louis, MO 63141	-	w	10/2006 Medical Services					111.00
Account No. xxAC-xx8116  Yellow Book USA PO Box 660052 Dallas, TX 75266		J	1/2006 Lawsuit; 100% business debt					6,487.00
Sheet no17_ of _17_ sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims  (Total of this page)							36,962.00	
Total (Report on Summary of Schedules)							861,835.94	

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Bruce Edwin Hopson, Linda Kathryn Hopson

**Debtors** 

## SCHEDULE G - EXECUTORY CONTRACTS AND UNEXPIRED LEASES

Describe all executory contracts of any nature and all unexpired leases of real or personal property. Include any timeshare interests. State nature of debtor's interest in contract, i.e., "Purchaser", "Agent", etc. State whether debtor is the lessor or lessee of a lease. Provide the names and complete mailing addresses of all other parties to each lease or contract described. If a minor child is a party to one of the leases or contracts, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m).

■ Check this box if debtor has no executory contracts or unexpired leases.

Name and Mailing Address, Including Zip Code, of Other Parties to Lease or Contract

Description of Contract or Lease and Nature of Debtor's Interest. State whether lease is for nonresidential real property. State contract number of any government contract.

Bruce Edwin Hopson,
Linda Kathryn Hopson

Debtors

## **SCHEDULE H - CODEBTORS**

Provide the information requested concerning any person or entity, other than a spouse in a joint case, that is also liable on any debts listed by debtor in the schedules of creditors. Include all guarantors and co-signers. If the debtor resides or resided in a community property state, commonwealth, or territory (including Alaska, Arizona, California, Idaho, Louisiana, Nevada, New Mexico, Puerto Rico, Texas, Washington, or Wisconsin) within the eight year period immediately preceding the commencement of the case, identify the name of the debtor's spouse and of any former spouse who resides or resided with the debtor in the community property state, commonwealth, or territory. Include all names used by the nondebtor spouse during the eight years immediately preceding the commencement of this case. If a minor child is a codebtor or a creditor, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m).

Check this box if debtor has no codebtors.

NAME AND ADDRESS OF CODEBTOR

NAME AND ADDRESS OF CREDITOR

In

	Bruce Edwin Hopson
re	Linda Kathryn Hopson

Deb

(1000	NIA	
Case	110	

Debtor(s)

## SCHEDULE I - CURRENT INCOME OF INDIVIDUAL DEBTOR(S)

The column labeled "Spouse" must be completed in all cases filed by joint debtors and by every married debtor, whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed. Do not state the name of any minor child. The average monthly income calculated on this form may differ from the current monthly income calculated on Form 22A, 22B, or 22C.

Debtor's Marital Status:  DEPENDENTS OF DE				OUSE		
2 cotor s mannar status.	RELATIONSHIP(S):	RELATIONSHIP(S):				
Married	Son		5			
Employment:	DEBTOR			SPOUSE		
Occupation	Bookkeeper	Sale	s Associat	e		
Name of Employer	Riley Ready Mix	Mass	sage Envy			
How long employed	Since 10/27/2008		e 7/2008			
Address of Employer	8000 Ivory Street	1252	8 Olive Blv	vd.		
	Saint Louis, MO 63111	Sain	t Louis, M	O 63141		
	or projected monthly income at time case filed)			DEBTOR		SPOUSE
	and commissions (Prorate if not paid monthly)		\$	2,958.32	\$	1,221.83
2. Estimate monthly overtime			\$	0.00	\$	0.00
3. SUBTOTAL			\$	2,958.32	\$_	1,221.83
4. LESS PAYROLL DEDUCTION	ONS					
a. Payroll taxes and social			\$	489.22	\$	121.61
b. Insurance			<u>\$</u>	121.77	\$ <del></del>	0.00
c. Union dues			\$ <del></del>	0.00	\$	0.00
d. Other (Specify):			<u>\$</u>	0.00	<u> </u>	0.00
			\$	0.00	\$	0.00
5. SUBTOTAL OF PAYROLL	DEDUCTIONS		\$	610.99	\$_	121.61
6. TOTAL NET MONTHLY TA	AKE HOME PAY		\$	2,347.33	\$	1,100.22
7. Regular income from operation	on of business or profession or farm (Attach details	ed statement)	\$	0.00	\$	0.00
8. Income from real property	•		\$	0.00	\$	0.00
9. Interest and dividends			\$	0.00	\$	0.00
dependents listed above	pport payments payable to the debtor for the debto	r's use or that o	s	0.00	\$	0.00
11. Social security or government (Specify):			\$	0.00	\$	0.00
(Specify).			ς <u> </u>	0.00	\$ <u></u>	0.00
12. Pension or retirement incom	0		φ —	0.00	Φ —	0.00
13. Other monthly income	e		Ψ	0.00	Ψ	0.00
(0 :0)			\$	0.00	\$	0.00
(Specify).			\$	0.00	\$ <del>-</del>	0.00
					· <del>-</del>	
14. SUBTOTAL OF LINES 7 T	HROUGH 13		\$	0.00	\$	0.00
15. AVERAGE MONTHLY IN	COME (Add amounts shown on lines 6 and 14)		\$	2,347.33	\$	1,100.22
16. COMBINED AVERAGE M	ONTHLY INCOME: (Combine column totals from	m line 15)		\$	3,447	.55

(Report also on Summary of Schedules and, if applicable, on Statistical Summary of Certain Liabilities and Related Data)

17. Describe any increase or decrease in income reasonably anticipated to occur within the year following the filing of this document:

Bruce	<b>Edwin</b>	Hopson
Linda	Kathry	n Hopson

# SCHEDULE J - CURRENT EXPENDITURES OF INDIVIDUAL DEBTOR(S)

Complete this schedule by estimating the average or projected monthly expenses of the debtor and the debtor's family at time case filed. Prorate any payments made bi-weekly, quarterly, semi-annually, or annually to show monthly rate. The average monthly expenses calculated on this form may differ from the deductions from income allowed on Form 22A or 22C.

Debtor(s)

☐ Check this box if a joint petition is filed and debtor's spouse maintains a separate household. Comple expenditures labeled "Spouse."	1	
1. Rent or home mortgage payment (include lot rented for mobile home)	\$	956.00
a. Are real estate taxes included? Yes X No		
b. Is property insurance included? Yes X No		
2. Utilities: a. Electricity and heating fuel	\$	183.00
b. Water and sewer	\$	60.00
c. Telephone	\$	65.00
d. Other See Detailed Expense Attachment	\$	250.00
3. Home maintenance (repairs and upkeep)	\$	100.00
4. Food	\$	650.00
5. Clothing	\$	100.00
6. Laundry and dry cleaning	\$	45.00
7. Medical and dental expenses	\$	190.00 285.00
8. Transportation (not including car payments)	\$	
9. Recreation, clubs and entertainment, newspapers, magazines, etc. 10. Charitable contributions	\$	100.00
	\$	0.00
11. Insurance (not deducted from wages or included in home mortgage payments)	¢.	0.00
a. Homeowner's or renter's	\$	0.00
b. Life c. Health	\$ \$	0.00
d. Auto		115.00
e. Other	\$ \$	0.00
12. Taxes (not deducted from wages or included in home mortgage payments)	Φ	0.00
(Specify) Personal property tax	\$	28.00
13. Installment payments: (In chapter 11, 12, and 13 cases, do not list payments to be included in the	Ф	20.00
plan)		
a. Auto	\$	0.00
b. Other Second mortgage	\$	195.00
c. Other Third Mortgage	\$	600.00
14. Alimony, maintenance, and support paid to others	\$	0.00
15. Payments for support of additional dependents not living at your home	\$	0.00
16. Regular expenses from operation of business, profession, or farm (attach detailed statement)	\$	0.00
17. Other Barber	\$	40.00
Other	\$	0.00
18. AVERAGE MONTHLY EXPENSES (Total lines 1-17. Report also on Summary of Schedules and, if applicable, on the Statistical Summary of Certain Liabilities and Related Data.)	\$	3,962.00
19. Describe any increase or decrease in expenditures reasonably anticipated to occur within the year following the filing of this document:		
20. STATEMENT OF MONTHLY NET INCOME	_	_
a. Average monthly income from Line 15 of Schedule I	\$	3,447.55
b. Average monthly expenses from Line 18 above	\$	3,962.00
c. Monthly net income (a. minus b.)	\$	-514.45

B6J (	Official	<b>Form</b>	<b>6J</b> )	(12/07)	

Rruce Edwin Honson

	Bruce Edwin Hopson		
In re	Linda Kathryn Hopson	Case No.	

Debtor(s)

## SCHEDULE J - CURRENT EXPENDITURES OF INDIVIDUAL DEBTOR(S) **Detailed Expense Attachment**

## **Other Utility Expenditures:**

Trash	<u> </u>	30.00
Mobile phone	\$	120.00
Cable	<del></del>	65.00
Internet	\$	35.00
Total Other Utility Expenditures	\$	250.00

## United States Bankruptcy Court Eastern District of Missouri

In re	Bruce Edwin Hopson Linda Kathryn Hopson		Case No.	
		Debtor(s)	Chapter	7

## DECLARATION CONCERNING DEBTOR'S SCHEDULES

#### DECLARATION UNDER PENALTY OF PERJURY BY INDIVIDUAL DEBTOR

	I declare under penalty of perjury that I have read the foregoing summary and schedules, consisting of sheets, and that they are true and correct to the best of my knowledge, information, and belief.		
Date	June 11, 2009	Signature	/s/ Bruce Edwin Hopson Bruce Edwin Hopson Debtor
Date	June 11, 2009	Signature	/s/ Linda Kathryn Hopson Linda Kathryn Hopson Joint Debtor

Penalty for making a false statement or concealing property: Fine of up to \$500,000 or imprisonment for up to 5 years or both. 18 U.S.C. §§ 152 and 3571.

# United States Bankruptcy Court Eastern District of Missouri

	Bruce Eawin Hopson			
In re	Linda Kathryn Hopson		Case No.	
		Debtor(s)	Chapter	7
			_	

#### STATEMENT OF FINANCIAL AFFAIRS

This statement is to be completed by every debtor. Spouses filing a joint petition may file a single statement on which the information for both spouses is combined. If the case is filed under chapter 12 or chapter 13, a married debtor must furnish information for both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed. An individual debtor engaged in business as a sole proprietor, partner, family farmer, or self-employed professional, should provide the information requested on this statement concerning all such activities as well as the individual's personal affairs. To indicate payments, transfers and the like to minor children, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. § 112; Fed. R. Bankr. P. 1007(m).

Questions 1 - 18 are to be completed by all debtors. Debtors that are or have been in business, as defined below, also must complete Questions 19 - 25. **If the answer to an applicable question is "None," mark the box labeled "None."** If additional space is needed for the answer to any question, use and attach a separate sheet properly identified with the case name, case number (if known), and the number of the question.

#### **DEFINITIONS**

"In business." A debtor is "in business" for the purpose of this form if the debtor is a corporation or partnership. An individual debtor is "in business" for the purpose of this form if the debtor is or has been, within six years immediately preceding the filing of this bankruptcy case, any of the following: an officer, director, managing executive, or owner of 5 percent or more of the voting or equity securities of a corporation; a partner, other than a limited partner, of a partnership; a sole proprietor or self-employed full-time or part-time. An individual debtor also may be "in business" for the purpose of this form if the debtor engages in a trade, business, or other activity, other than as an employee, to supplement income from the debtor's primary employment.

"Insider." The term "insider" includes but is not limited to: relatives of the debtor; general partners of the debtor and their relatives; corporations of which the debtor is an officer, director, or person in control; officers, directors, and any owner of 5 percent or more of the voting or equity securities of a corporate debtor and their relatives; affiliates of the debtor and insiders of such affiliates; any managing agent of the debtor. 11 U.S.C. § 101.

## 1. Income from employment or operation of business

None	
_	

State the gross amount of income the debtor has received from employment, trade, or profession, or from operation of the debtor's business, including part-time activities either as an employee or in independent trade or business, from the beginning of this calendar year to the date this case was commenced. State also the gross amounts received during the **two years** immediately preceding this calendar year. (A debtor that maintains, or has maintained, financial records on the basis of a fiscal rather than a calendar year may report fiscal year income. Identify the beginning and ending dates of the debtor's fiscal year.) If a joint petition is filed, state income for each spouse separately. (Married debtors filing under chapter 12 or chapter 13 must state income of both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

\$18,512.00	Debtor 2007
\$6.144.31	Debtor 2008
\$15,836.49	Debtor 2009 Year-to-Date
\$0.00	Co-Debtor 2007
\$4,812.69	Co-Debtor 2008
\$6,880.84	Co-Debtor 2009 Year-to-Date

COLIDCE

AMOUNT

#### 2. Income other than from employment or operation of business

None

State the amount of income received by the debtor other than from employment, trade, profession, or operation of the debtor's business during the **two years** immediately preceding the commencement of this case. Give particulars. If a joint petition is filed, state income for each spouse separately. (Married debtors filing under chapter 12 or chapter 13 must state income for each spouse whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

AMOUNT SOURCE

#### 3. Payments to creditors

None

Complete a. or b., as appropriate, and c.

a. *Individual or joint debtor(s) with primarily consumer debts*. List all payments on loans, installment purchases of goods or services, and other debts to any creditor made within **90 days** immediately preceding the commencement of this case unless the aggregate value of all property that constitutes or is affected by such transfer is less than \$600. Indicate with an (\*) any payments that were made to a creditor on account of a domestic support obligation or as part of an alternative repayment schedule under a plan by an approved nonprofit budgeting and creditor counseling agency. (Married debtors filing under chapter 12 or chapter 13 must include payments by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS	DATES OF		AMOUNT STILL
OF CREDITOR	PAYMENTS	AMOUNT PAID	OWING
Citimortgage	Three payments of \$760.00	\$2,280.00	\$55,547.95
1000 Technology Dr	made within the last 90		
O'Fallon, MO 63368-2240	days		
US Bank	Three payments of \$195.00	\$585.00	\$10,213.00
Bankruptcy Department	made within the last 90		•
PO Box 5229	days		
Cincinnati, OH 45201-5229	-		

None

b. Debtor whose debts are not primarily consumer debts: List each payment or other transfer to any creditor made within **90 days** immediately preceding the commencement of the case unless the aggregate value of all property that constitutes or is affected by such transfer is less than \$5,475. If the debtor is an individual, indicate with an asterisk (\*) any payments that were made to a creditor on account of a domestic support obligation or as part of an alternative repayment schedule under a plan by an approved nonprofit budgeting and creditor counseling agency. (Married debtors filing under chapter 12 or chapter 13 must include payments by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

AMOUNT
DATES OF PAID OR
PAYMENTS/ VALUE OF AMOUNT STILL
TRANSFERS TRANSFERS OWING

NAME AND ADDRESS OF CREDITOR

c. All debtors: List all payments made within **one year** immediately preceding the commencement of this case to or for the benefit of creditors who are or were insiders. (Married debtors filing under chapter 12 or chapter 13 must include payments by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF CREDITOR AND

AMOUNT STILL

RELATIONSHIP TO DEBTOR

DATE OF PAYMENT

AMOUNT PAID

OWING

#### 4. Suits and administrative proceedings, executions, garnishments and attachments

NATURE OF PROCEEDING

None

None

a. List all suits and administrative proceedings to which the debtor is or was a party within **one year** immediately preceding the filing of this bankruptcy case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

CAPTION OF SUIT
AND CASE NUMBER
Midland Funding LLC vs.
Linda Hopson

Civil

COURT OR AGENCY STATUS OR
AND LOCATION DISPOSITION
21st Judicial Circuit Court, St. Pending
Louis County

Case No: 2107AC-23931

CAPTION OF SUIT COURT OR AGENCY STATUS OR NATURE OF PROCEEDING AND CASE NUMBER AND LOCATION DISPOSITION Unifund CCR Partners vs. **Breach of Contract** St. Louis County Circuit Court Pending Linda Hopson Case No: 07AC-005084 S & S Active Wear LLC vs. **Breach of Contract** St. Louis County Circuit Court Pending Hopson Case No: 05AC-005735 Fortune Southfield Civil St. Louis City Circuit Court **Pending** Company, LLP vs Bruce & Linda Hopson Case No: 05A-005183 Discover Bank vs Linda Civil St Louis County Circuit Court Pending Hopson Case No: 03AC-031021 **Bank Of America vs Bruce** Civil St. Louis City Circuit Court **Judgment** Hopson Case No: 05AC-030196 MRC Receivables vs Bruce Civil St. Louis County Circuit Court Judgment Hopson Case No: 05AC-028354 **CACV** of Colorado vs Linda **AC Suit on Account** St. Louis County Circuit Court Judgment Hopson Case No: 06AC-026997 TLJ/US Bank vs Bruce **AC Suit on Account** St. Louis City Circuit Court **Judgment** Hopson Case No: 08SL-AC01197 **US Bank vs Bruce Hopson** Civil St. Louis County Circuit Court Judgment Case No: 04AC-032539 Yellow Book Sales & Civil St. Louis County Circuit Court Judgment Distribution vs Bruce & Linda Hopson Case No: 05AC-028116

Corporation vs Bruce & Linda Hopson

King Commercial

Case No: 4AC-030762

None b. Describe all property that has been attached, garnished or seized under any legal or equitable process within **one year** immediately

preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning property of either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF PERSON FOR WHOSE
BENEFIT PROPERTY WAS SEIZED
DATE OF SEIZURE
DESCRIPTION AND VALUE OF
PROPERTY

#### 5. Repossessions, foreclosures and returns

Civil

None List all property that has been repossessed by a creditor, sold at a foreclosure sale, transferred through a deed in lieu of foreclosure or

returned to the seller, within **one year** immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning property of either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF CREDITOR OR SELLER DATE OF REPOSSESSION, FORECLOSURE SALE, TRANSFER OR RETURN

DESCRIPTION AND VALUE OF PROPERTY

St. Louis County Circuit Court Judgment

#### 6. Assignments and receiverships

None

a. Describe any assignment of property for the benefit of creditors made within 120 days immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include any assignment by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

DATE OF

NAME AND ADDRESS OF ASSIGNEE

ASSIGNMENT

TERMS OF ASSIGNMENT OR SETTLEMENT

b. List all property which has been in the hands of a custodian, receiver, or court-appointed official within **one year** immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning property of either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND LOCATION

NAME AND ADDRESS OF CUSTODIAN

OF COURT CASE TITLE & NUMBER DATE OF ORDER

DESCRIPTION AND VALUE OF

**PROPERTY** 

7. Gifts

List all gifts or charitable contributions made within one year immediately preceding the commencement of this case except ordinary and usual gifts to family members aggregating less than \$200 in value per individual family member and charitable contributions aggregating less than \$100 per recipient. (Married debtors filing under chapter 12 or chapter 13 must include gifts or contributions by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF PERSON OR ORGANIZATION RELATIONSHIP TO DEBTOR, IF ANY

DESCRIPTION AND DATE OF GIFT

VALUE OF GIFT

8. Losses

None

List all losses from fire, theft, other casualty or gambling within one year immediately preceding the commencement of this case or since the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include losses by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

DESCRIPTION AND VALUE OF PROPERTY

DESCRIPTION OF CIRCUMSTANCES AND, IF LOSS WAS COVERED IN WHOLE OR IN PART BY INSURANCE, GIVE PARTICULARS

DATE OF LOSS

## 9. Payments related to debt counseling or bankruptcy

None 

List all payments made or property transferred by or on behalf of the debtor to any persons, including attorneys, for consultation concerning debt consolidation, relief under the bankruptcy law or preparation of the petition in bankruptcy within one year immediately preceding the commencement of this case.

NAME AND ADDRESS OF PAYEE

The Bankruptcy Company 1600 S Brentwood Blvd, Suite 725 Saint Louis, MO 63144-0009

DATE OF PAYMENT, NAME OF PAYOR IF OTHER THAN DEBTOR

AMOUNT OF MONEY OR DESCRIPTION AND VALUE OF PROPERTY

\$900.00

#### 10. Other transfers

None

a. List all other property, other than property transferred in the ordinary course of the business or financial affairs of the debtor, transferred either absolutely or as security within two years immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include transfers by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF TRANSFEREE, RELATIONSHIP TO DEBTOR

DATE

DESCRIBE PROPERTY TRANSFERRED AND VALUE RECEIVED

b. List all property transferred by the debtor within ten years immediately preceding the commencement of this case to a self-settled trust or similar device of which the debtor is a beneficiary.

NAME OF TRUST OR OTHER DEVICE

DATE(S) OF TRANSFER(S) AMOUNT OF MONEY OR DESCRIPTION AND VALUE OF PROPERTY OR DEBTOR'S INTEREST

IN PROPERTY

#### 11. Closed financial accounts

None

List all financial accounts and instruments held in the name of the debtor or for the benefit of the debtor which were closed, sold, or otherwise transferred within **one year** immediately preceding the commencement of this case. Include checking, savings, or other financial accounts, certificates of deposit, or other instruments; shares and share accounts held in banks, credit unions, pension funds, cooperatives, associations, brokerage houses and other financial institutions. (Married debtors filing under chapter 12 or chapter 13 must include information concerning accounts or instruments held by or for either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

> TYPE OF ACCOUNT, LAST FOUR DIGITS OF ACCOUNT NUMBER. AND AMOUNT OF FINAL BALANCE

AMOUNT AND DATE OF SALE OR CLOSING

NAME AND ADDRESS OF INSTITUTION

#### 12. Safe deposit boxes

None 

List each safe deposit or other box or depository in which the debtor has or had securities, cash, or other valuables within one year immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include boxes or depositories of either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF BANK OR OTHER DEPOSITORY **US Bank Bankruptcy Department** PO Box 5229 Cincinnati, OH 45201-5229

NAMES AND ADDRESSES OF THOSE WITH ACCESS TO BOX OR DEPOSITORY **Bruce Edwin Hopson** Linda Kathryn Hopson 8525 Vasel Ave, Saint Louis MO 63123

DESCRIPTION OF CONTENTS Paperwork only (no cash or other valuables)

DATE OF TRANSFER OR SURRENDER, IF ANY

#### 13. Setoffs

None

List all setoffs made by any creditor, including a bank, against a debt or deposit of the debtor within 90 days preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF CREDITOR

DATE OF SETOFF

AMOUNT OF SETOFF

#### 14. Property held for another person

None List all property owned by another person that the debtor holds or controls.

DESCRIPTION AND VALUE OF

NAME AND ADDRESS OF OWNER

**PROPERTY** 

LOCATION OF PROPERTY

### 15. Prior address of debtor

None

If the debtor has moved within three years immediately preceding the commencement of this case, list all premises which the debtor occupied during that period and vacated prior to the commencement of this case. If a joint petition is filed, report also any separate address of either spouse.

**ADDRESS** NAME USED DATES OF OCCUPANCY

### 16. Spouses and Former Spouses

None

If the debtor resides or resided in a community property state, commonwealth, or territory (including Alaska, Arizona, California, Idaho, Louisiana, Nevada, New Mexico, Puerto Rico, Texas, Washington, or Wisconsin) within **eight years** immediately preceding the commencement of the case, identify the name of the debtor's spouse and of any former spouse who resides or resided with the debtor in the community property state.

NAME

#### 17. Environmental Information.

For the purpose of this question, the following definitions apply:

"Environmental Law" means any federal, state, or local statute or regulation regulating pollution, contamination, releases of hazardous or toxic substances, wastes or material into the air, land, soil, surface water, groundwater, or other medium, including, but not limited to, statutes or regulations regulating the cleanup of these substances, wastes, or material.

"Site" means any location, facility, or property as defined under any Environmental Law, whether or not presently or formerly owned or operated by the debtor, including, but not limited to, disposal sites.

"Hazardous Material" means anything defined as a hazardous waste, hazardous substance, toxic substance, hazardous material, pollutant, or contaminant or similar term under an Environmental Law

None

a. List the name and address of every site for which the debtor has received notice in writing by a governmental unit that it may be liable or potentially liable under or in violation of an Environmental Law. Indicate the governmental unit, the date of the notice, and, if known, the Environmental Law:

NAME AND ADDRESS OF DATE OF ENVIRONMENTAL SITE NAME AND ADDRESS GOVERNMENTAL UNIT NOTICE LAW

None b. List the name and address of every site for which the debtor provided notice to a governmental unit of a release of Hazardous

Material. Indicate the governmental unit to which the notice was sent and the date of the notice.

NAME AND ADDRESS OF DATE OF ENVIRONMENTAL SITE NAME AND ADDRESS GOVERNMENTAL UNIT NOTICE LAW

None c. List all judicial or administrative proceedings, including settlements or orders, under any Environmental Law with respect to which

the debtor is or was a party. Indicate the name and address of the governmental unit that is or was a party to the proceeding, and the docket number.

NAME AND ADDRESS OF GOVERNMENTAL UNIT

DOCKET NUMBER

STATUS OR DISPOSITION

#### 18. Nature, location and name of business

None 

a. If the debtor is an individual, list the names, addresses, taxpayer identification numbers, nature of the businesses, and beginning and ending dates of all businesses in which the debtor was an officer, director, partner, or managing executive of a corporation, partner in a partnership, sole proprietor, or was self-employed in a trade, profession, or other activity either full- or part-time within six years immediately preceding the commencement of this case, or in which the debtor owned 5 percent or more of the voting or equity securities within six years immediately preceding the commencement of this case.

If the debtor is a partnership, list the names, addresses, taxpayer identification numbers, nature of the businesses, and beginning and ending dates of all businesses in which the debtor was a partner or owned 5 percent or more of the voting or equity securities, within six years immediately preceding the commencement of this case.

If the debtor is a corporation, list the names, addresses, taxpayer identification numbers, nature of the businesses, and beginning and ending dates of all businesses in which the debtor was a partner or owned 5 percent or more of the voting or equity securities within six **years** immediately preceding the commencement of this case.

> LAST FOUR DIGITS OF SOCIAL-SECURITY OR OTHER INDIVIDUAL TAXPAYER-I.D. NO.

NAME (ITIN)/ COMPLETE EIN

0346

Summit 0346 Communication, Inc.

**Embroid Me** 

(Franchise)

**ADDRESS** 

8525 Vasel Ave. Saint Louis, MO 63123

8525 Vasel Ave. Saint Louis, MO 63123 NATURE OF BUSINESS Advertising business (S- 1999 through 2002

Corporation) Advertising and

(Franchise -- Sole

Proprietorship)

**BEGINNING AND** 

**ENDING DATES** 

9/2002 through

**Specialty Products** 3/2005

b. Identify any business listed in response to subdivision a., above, that is "single asset real estate" as defined in 11 U.S.C. § 101.

None

ADDRESS NAME

The following questions are to be completed by every debtor that is a corporation or partnership and by any individual debtor who is or has been, within six years immediately preceding the commencement of this case, any of the following: an officer, director, managing executive, or owner of more than 5 percent of the voting or equity securities of a corporation; a partner, other than a limited partner, of a partnership, a sole proprietor or self-employed in a trade, profession, or other activity, either full- or part-time.

(An individual or joint debtor should complete this portion of the statement only if the debtor is or has been in business, as defined above, within six years immediately preceding the commencement of this case. A debtor who has not been in business within those six years should go directly to the signature page.)

#### 19. Books, records and financial statements

None

a. List all bookkeepers and accountants who within two years immediately preceding the filing of this bankruptcy case kept or supervised the keeping of books of account and records of the debtor.

#### NAME AND ADDRESS

#### DATES SERVICES RENDERED

None b. List all firms or individuals who within the two years immediately preceding the filing of this bankruptcy case have audited the books of account and records, or prepared a financial statement of the debtor.

NAME **ADDRESS** 

### DATES SERVICES RENDERED

None c. List all firms or individuals who at the time of the commencement of this case were in possession of the books of account and records of the debtor. If any of the books of account and records are not available, explain.

NAME **ADDRESS**  None d. List all financial institutions, creditors and other parties, including mercantile and trade agencies, to whom a financial statement was issued by the debtor within **two years** immediately preceding the commencement of this case.

NAME AND ADDRESS DATE ISSUED

#### 20. Inventories

None a. List the dates of the last two inventories taken of your property, the name of the person who supervised the taking of each inventory, and the dollar amount and basis of each inventory.

DOLLAR AMOUNT OF INVENTORY

DATE OF INVENTORY

DATE OF INVENTORY

INVENTORY SUPERVISOR

(Specify cost, market or other basis)

None b. List the name and address of the person having possession of the records of each of the two inventories reported in a., above.

\_

NAME AND ADDRESSES OF CUSTODIAN OF INVENTORY RECORDS

## 21 . Current Partners, Officers, Directors and Shareholders

None a. If the debtor is a partnership, list the nature and percentage of partnership interest of each member of the partnership.

None

NAME AND ADDRESS NATURE OF INTEREST PERCENTAGE OF INTEREST

None b. If the debtor is a corporation, list all officers and directors of the corporation, and each stockholder who directly or indirectly owns,

controls, or holds 5 percent or more of the voting or equity securities of the corporation.

NATURE AND PERCENTAGE
NAME AND ADDRESS
TITLE
NATURE AND PERCENTAGE
OF STOCK OWNERSHIP

### 22. Former partners, officers, directors and shareholders

a. If the debtor is a partnership, list each member who withdrew from the partnership within **one year** immediately preceding the

commencement of this case.

NAME ADDRESS DATE OF WITHDRAWAL

None b. If the debtor is a corporation, list all officers, or directors whose relationship with the corporation terminated within **one year** immediately preceding the commencement of this case.

NAME AND ADDRESS TITLE DATE OF TERMINATION

#### 23. Withdrawals from a partnership or distributions by a corporation

None If the debtor is a partnership or corporation, list all withdrawals or distributions credited or given to an insider, including compensation

in any form, bonuses, loans, stock redemptions, options exercised and any other perquisite during **one year** immediately preceding the commencement of this case.

NAME & ADDRESS
OF RECIPIENT,
DATE AND PURPOSE
OR DESCRIPTION AND
RELATIONSHIP TO DEBTOR
OF WITHDRAWAL
VALUE OF PROPERTY

#### 24. Tax Consolidation Group.

None If the debtor is a corporation, list the name and federal taxpayer identification number of the parent corporation of any consolidated

group for tax purposes of which the debtor has been a member at any time within **six years** immediately preceding the commencement of the case.

NAME OF PARENT CORPORATION

TAXPAYER IDENTIFICATION NUMBER (EIN)

#### 25. Pension Funds.

None

If the debtor is not an individual, list the name and federal taxpayer identification number of any pension fund to which the debtor, as an employer, has been responsible for contributing at any time within **six years** immediately preceding the commencement of the case.

NAME OF PENSION FUND

TAXPAYER IDENTIFICATION NUMBER (EIN)

## DECLARATION UNDER PENALTY OF PERJURY BY INDIVIDUAL DEBTOR

I declare under penalty of perjury that I have read the answers contained in the foregoing statement of financial affairs and any attachments thereto and that they are true and correct.

Date	June 11, 2009	Signature	/s/ Bruce Edwin Hopson	
		-	Bruce Edwin Hopson Debtor	
Date	June 11, 2009	Signature	/s/ Linda Kathryn Hopson	
			Linda Kathryn Hopson	
			Joint Debtor	

Penalty for making a false statement: Fine of up to \$500,000 or imprisonment for up to 5 years, or both. 18 U.S.C. §§ 152 and 3571

## United States Bankruptcy Court Eastern District of Missouri

	Bruce Edwin Hopson			
In re	Linda Kathryn Hopson		Case No.	
		Debtor(s)	Chapter	7

## CHAPTER 7 INDIVIDUAL DEBTOR'S STATEMENT OF INTENTION

**PART A -** Debts secured by property of the estate. (Part A must be fully completed for **EACH** debt which is secured by property of the estate. Attach additional pages if necessary.)

	property of the estate. Attach additional	pages if nec	eessary.)
Propert	y No. 1		
Credito Citimo	or's Name: rtgage		Describe Property Securing Debt: Residential Real Estate Location: 8525 Vasel Ave, Saint Louis MO
Propert	y will be (check one):		L
	Surrendered	Retained	
	ning the property, I intend to (check at least on Redeem the property  Reaffirm the debt	e):	
		r example, av	void lien using 11 U.S.C. § 522(f)).
Propert	y is (check one): Claimed as Exempt	1 /	□ Not claimed as exempt
	Claimed as Exempt		The change as exempt
Propert	y No. 2		
	or's Name: ommercial Coporation		Describe Property Securing Debt: 8'x10' Trade Show Display *To be surrendered in bankruptcy
Propert	y will be (check one):		
	Surrendered	1 Retained	
	Redeem the property Reaffirm the debt Other. Explain(fo		void lien using 11 U.S.C. § 522(f)).
			0 (-//-
_	y is (check one):		Not alsimod as assessed
	Claimed as Exempt		Not claimed as exempt

38 (Form 8) (12/08)		_	Page 2
Property No. 3			
Creditor's Name: Midwest Bank Center		Describe Property S Residential Real Est Location: 8525 Vase	
Property will be (check one):			
☐ Surrendered	Retained		
If retaining the property, I intend to (check a  ☐ Redeem the property  ☐ Reaffirm the debt			
☐ Other. Explain	(for example, av	oid lien using 11 U.S.	C. § 522(f)).
Property is (check one):			
■ Claimed as Exempt		☐ Not claimed as ex	kempt
Property No. 4			
Creditor's Name: US Bank		Describe Property S Residential Real Est Location: 8525 Vase	
Property will be (check one):			
□ Surrendered	Retained		
If retaining the property, I intend to (check a  ☐ Redeem the property  ☐ Reaffirm the debt ☐ Other. Explain		oid lien using 11 U.S.	C. § 522(f)).
-	\	C	
Property is (check one):  Claimed as Exempt		☐ Not claimed as ex	kempt
PART B - Personal property subject to unexpartach additional pages if necessary.)  Property No. 1	pired leases. (All three	columns of Part B mu	st be completed for each unexpired lease.
Troporty 140. 1			
Lessor's Name: -NONE-	Describe Leased Pro	operty:	Lease will be Assumed pursuant to 11 U.S.C. § 365(p)(2):  ☐ YES ☐ NO

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I declare under penalty of perjury that the above indicates my intention as to any property of my estate securing a debt and/or personal property subject to an unexpired lease.

Date	June 11, 2009	Signature	/s/ Bruce Edwin Hopson
		_	Bruce Edwin Hopson
			Debtor
Date	June 11, 2009	Signature	/s/ Linda Kathryn Hopson
			Linda Kathryn Hopson
			Ioint Debtor

# United States Bankruptcy Court Eastern District of Missouri

In r		win Hopson hryn Hopson			Case No	).	
				Debtor(s)	Chapter		
		DISCLOSURE (	OF COMPENS	ATION OF ATTOR	NEY FOR I	DERTOR(S)	
1.	Pursuant to 11 compensation p	U.S.C. § 329(a) and and to me within one ye	Bankruptcy Rule 2	2016(b), I certify that I am of the petition in bankruptcy, r in connection with the bankruptcy.	the attorney for agreed to be j	or the above-named do	
	For legal s	ervices, I have agreed to	accept		\$	900.00	
	Prior to the	e filing of this statement	I have received		. \$	900.00	
	Balance D	ue			. \$	0.00	
2.	\$ <u>299.00</u>	of the filing fee has been	n paid.				
3.	The source of the	ne compensation paid to	me was:				
		Debtor		Other (specify):			
4.	The source of c	ompensation to be paid	to me is:				
	•	Debtor		Other (specify):			
5.	firm.	-	_	ensation with any other perso	•		-
				ation with a person or persons es of the people sharing in the			my law firm.
5.	In return for the	e above-disclosed fee, I	have agreed to rende	r legal service for all aspects	of the bankruptc	y case, including:	
	<ul><li>b. Preparation</li><li>c. Representation</li><li>d. Representation</li><li>e. [Other provious Negotians]</li></ul>	and filing of any petition of the debtor at the rition of the debtor in adversions as needed]	n, schedules, stateme meeting of creditors a ersary proceedings ar d creditors to redu	g advice to the debtor in deterent of affairs and plan which n and confirmation hearing, and ad other contested bankruptcy uce to market value; exent r avoidance of liens on he	nay be required; any adjourned h matters; nption plannir	earings thereof;	
7.	Prepa	ration and filing of i	reaffirmation agre	es not include the following s ements and applications ted bankruptcy matters.		epresentation of the	e debtor(s)
			(	CERTIFICATION			
this	I certify that the bankruptcy proc		e statement of any ag	reement or arrangement for pa	ayment to me for	representation of the o	lebtor(s) in
Date	ed: <b>June 11</b> ,	2009		/s/ Robert Lawson			
			<u> </u>	Robert Lawson 55 <sup>2</sup> 502943,54880	1534,51935 Da	vid Gunn	
				The Bankruptcy Co			
				1600 S Brentwood Saint Louis, MO 63		5	
				314-961-9822 Fax	: Fax: 314-961	-9825	
				stlouis@tbcwam.c	om		

# UNITED STATES BANKRUPTCY COURT EASTERN DISTRICT OF MISSOURI

# NOTICE TO CONSUMER DEBTOR(S) UNDER § 342(b) OF THE BANKRUPTCY CODE

In accordance with § 342(b) of the Bankruptcy Code, this notice to individuals with primarily consumer debts: (1) Describes briefly the services available from credit counseling services; (2) Describes briefly the purposes, benefits and costs of the four types of bankruptcy proceedings you may commence; and (3) Informs you about bankruptcy crimes and notifies you that the Attorney General may examine all information you supply in connection with a bankruptcy case.

You are cautioned that bankruptcy law is complicated and not easily described. Thus, you may wish to seek the advice of an attorney to learn of your rights and responsibilities should you decide to file a petition. Court employees cannot give you legal advice.

Notices from the bankruptcy court are sent to the mailing address you list on your bankruptcy petition. In order to ensure that you receive information about events concerning your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address. If you are filing a **joint case** (a single bankruptcy case for two individuals married to each other), and each spouse lists the same mailing address on the bankruptcy petition, you and your spouse will generally receive a single copy of each notice mailed from the bankruptcy court in a jointly-addressed envelope, unless you file a statement with the court requesting that each spouse receive a separate copy of all notices.

### 1. Services Available from Credit Counseling Agencies

With limited exceptions, § 109(h) of the Bankruptcy Code requires that all individual debtors who file for bankruptcy relief on or after October 17, 2005, receive a briefing that outlines the available opportunities for credit counseling and provides assistance in performing a budget analysis. The briefing must be given within 180 days before the bankruptcy filing. The briefing may be provided individually or in a group (including briefings conducted by telephone or on the Internet) and must be provided by a nonprofit budget and credit counseling agency approved by the United States trustee or bankruptcy administrator. The clerk of the bankruptcy court has a list that you may consult of the approved budget and credit counseling agencies. Each debtor in a joint case must complete the briefing.

In addition, after filing a bankruptcy case, an individual debtor generally must complete a financial management instructional course before he or she can receive a discharge. The clerk also has a list of approved financial management instructional courses. Each debtor in a joint case must complete the course.

## 2. The Four Chapters of the Bankruptcy Code Available to Individual Consumer Debtors

## Chapter 7: Liquidation (\$245 filing fee, \$39 administrative fee, \$15 trustee surcharge: Total Fee \$299)

- 1. Chapter 7 is designed for debtors in financial difficulty who do not have the ability to pay their existing debts. Debtors whose debts are primarily consumer debts are subject to a "means test" designed to determine whether the case should be permitted to proceed under chapter 7. If your income is greater than the median income for your state of residence and family size, in some cases, creditors have the right to file a motion requesting that the court dismiss your case under § 707(b) of the Code. It is up to the court to decide whether the case should be dismissed.
- 2. Under chapter 7, you may claim certain of your property as exempt under governing law. A trustee may have the right to take possession of and sell the remaining property that is not exempt and use the sale proceeds to pay your creditors.
- 3. The purpose of filing a chapter 7 case is to obtain a discharge of your existing debts. If, however, you are found to have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge and, if it does, the purpose for which you filed the bankruptcy petition will be defeated.
- 4. Even if you receive a general discharge, some particular debts are not discharged under the law. Therefore, you may still be responsible for most taxes and student loans; debts incurred to pay nondischargeable taxes; domestic support and property settlement obligations; most fines, penalties, forfeitures, and criminal restitution obligations; certain debts which are not properly listed in your bankruptcy papers; and debts for death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs. Also, if a creditor can prove that a debt arose from fraud, breach of fiduciary duty, or theft, or from a willful and malicious injury, the bankruptcy court may determine that the debt is not discharged.

# <u>Chapter 13</u>: Repayment of All or Part of the Debts of an Individual with Regular Income (\$235 filing fee, \$39 administrative fee: Total fee \$274)

1. Chapter 13 is designed for individuals with regular income who would like to pay all or part of their debts in installments

**B 201** (12/08)

over a period of time. You are only eligible for chapter 13 if your debts do not exceed certain dollar amounts set forth in the Bankruptcy Code.

- 2. Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, using your future earnings. The period allowed by the court to repay your debts may be three years or five years, depending upon your income and other factors. The court must approve your plan before it can take effect.
- 3. After completing the payments under your plan, your debts are generally discharged except for domestic support obligations; most student loans; certain taxes; most criminal fines and restitution obligations; certain debts which are not properly listed in your bankruptcy papers; certain debts for acts that caused death or personal injury; and certain long term secured obligations.

## **Chapter 11:** Reorganization (\$1000 filing fee, \$39 administrative fee: Total fee \$1039)

Chapter 11 is designed for the reorganization of a business but is also available to consumer debtors. Its provisions are quite complicated, and any decision by an individual to file a chapter 11 petition should be reviewed with an attorney.

## Chapter 12: Family Farmer or Fisherman (\$200 filing fee, \$39 administrative fee: Total fee \$239)

Chapter 12 is designed to permit family farmers and fishermen to repay their debts over a period of time from future earnings and is similar to chapter 13. The eligibility requirements are restrictive, limiting its use to those whose income arises primarily from a family-owned farm or commercial fishing operation.

## 3. Bankruptcy Crimes and Availability of Bankruptcy Papers to Law Enforcement Officials

A person who knowingly and fraudulently conceals assets or makes a false oath or statement under penalty of perjury, either orally or in writing, in connection with a bankruptcy case is subject to a fine, imprisonment, or both. All information supplied by a debtor in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the United States Trustee, the Office of the United States Attorney, and other components and employees of the Department of Justice.

**WARNING:** Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information regarding your creditors, assets, liabilities, income, expenses and general financial condition. Your bankruptcy case may be dismissed if this information is not filed with the court within the time deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court.

## **Certificate of Attorney**

I hereby certify that I delivered to the debtor this notice required by § 342(b) of the Bankruptcy Code.

502943,54880	X /s/ Robert Lawson	June 11, 2009
Printed Name of Attorney	Signature of Attorney	Date
Address:		
1600 S Brentwood Blvd, Suite 725		
Saint Louis, MO 63144-0009		
314-961-9822		
stlouis@tbcwam.com		
Certifica	te of Debtor	
I (We), the debtor(s), affirm that I (we) have received and	I read this notice.	
Bruce Edwin Hopson		
Linda Kathryn Hopson	X /s/ Bruce Edwin Hopson	June 11, 2009
Printed Name(s) of Debtor(s)	Signature of Debtor	Date
Case No. (if known)	X /s/ Linda Kathryn Hopson	June 11, 2009
	Signature of Joint Debtor (if any)	Date

Robert Lawson 551534.51935 David Gunn

# United States Bankruptcy Court Eastern District of Missouri

In re	Linda Kathryn Hopson		Case No.	
		Debtor(s)	Chapter	7
	VERIFICATION	ON OF CREDITOR N	MATRIX	
conta comp	The above named debtor(s) hereby certification in the names and addresses of my creditete.			
		/s/ Bruce Edwin Hop	oson	
		Bruce Edwin Hopso		
		Debtor		
		/s/ Linda Kathryn Ho	pson	
		Linda Kathryn Hops		
		Joint Debtor		
		Dated: June 11,	2009	

**Bruce Edwin Hopson** 

Accent Urology c/o Regional Credit Services 1201 Jefferson St, Ste 150 Washington, MO 63090-4453

Accent Urology 2355 Dougherty Ferry Rd Suite 410 Saint Louis, MO 63122-3325

AKC Cocker Spaniel c/o Unifun CCR Partners 10625 Techwood Circle Cincinnati, OH 45242

American Express PO Box 7863 Fort Lauderdale, FL 33329-7863

American Express Business Finance Corp. 600 Travis St, Ste 1300 Houston, TX 77002

AT & T c/o Collection Company of America 700 Longwater Drive Norwell, MA 02061-1624

AT & T Mobility c/o Afni Inc Bankruptcy Department PO Box 3427 Bloomington, IL 61702-3427

AT&T
Bankruptcy Department
PO Box 769
Arlington, TX 76004

AT&T Mobility PO Box 650553 Dallas, TX 75265-0553

BAC/FLeet Bankcard 200 Tournament Drive Horsham, PA 19044

Bank of America c/o Gerald E Moore & Associates PO Box 723548 Atlanta, GA 31139

Bank of America PO Box 15026 Wilmington, DE 19850-5026 Barry Witton, LLC 621 South New Ballas Rd, Ste 2002 B Saint Louis, MO 63141

BP Cardmember Services PO Box 94014 Palatine, IL 60094-4014

CACV of Colorado 370 17th St Ste 5000 Denver, CO 80202

CACV of Colorado c/o St. Louis County Court 7900 Carondelet Saint Louis, MO 63105

CACV of Colorado, LLC c/o Gamache & Myers PC 1000 Camera Ave Suite A Saint Louis, MO 63126

Capital One Bankruptcy Correspondence PO Box 5155 Norcross, GA 30091

CashNetUsa.Com 200 W Jackson Blvd 14th Fl Chicago, IL 60606-6941

Charter Advertising St. Louis 3660 South Geyer Rd, Ste 250 Saint Louis, MO 63127

Charter Communications c/o Credit Protection Association 13355 Noel Road Ste 2100 Attn: Bankruptcy Department Dallas, TX 75240

Charter Communications 941 Charter Commons Dr Chesterfield, MO 63017-0609

Chase PO Box 15298 Wilmington, DE 19850-5298

Chase c/o Creditors Financial Group PO Box 440290 Aurora, CO 80044

Chase Manhattan Bank c/o Hudson & Keyes LLC 362 Blackbrook Road Painesville, OH 44077

Chase Manhattan Bank, USA Cardmember Service PO Box 94014 Palatine, IL 60094-4014

Cingular Wireless c/o Nationwide Recovery Systems 2304 Tarpley Rd Ste 134 Carrollton, TX 75006-2467

Cingular Wireless PO Box 650553 Dallas, TX 75265-0553

Citi Cards c/o Northland Group Inc PO Box 390905 Minneapolis, MN 55439

Citi Cards PO Box 6000 (customer service - credit cards) The Lakes, NV 89163-6000

Citi Cards c/o Midland Credit Managment Bankruptcy Department 8875 Aero Dr Ste 200 San Diego, CA 92123

Citi Cards PO Box 6000 The Lakes, NV 89163-6000

Citimortgage 1000 Technology Dr O'Fallon, MO 63368-2240

Des Peres Hosptial Attn: Patient Accounts Department 2345 Dougherty Ferry Rd. Saint Louis, MO 63122

Dianon c/o LCA Collections PO Box 2240 Burlington, NC 27216-2240 Dianon c/o AMCA 2269 S Saw Mill River Rd Bldg 3 Elmsford, NY 10523

Discover c/o National Action Financial Svcs 165 Lawrence Bell Dr Ste 100 PO Box 9027 Williamsville, NY 14231-9027

Discover c/o Office of the Sheriff 7900 Carondelet Ave Saint Louis, MO 63105

Discover PO Box 30943 Salt Lake City, UT 84130

Discover c/o Cohen, McNeile, Pappas & Shuttlewort 1125 Grand Ave. Ste 1500 Kansas City, MO 64106

Dr Lester Reese c/o Midwest Support Services PO Box 1706 Saint Peters, MO 63376

Embroid Me 1801 Australlan Avenue South West Palm Beach, FL 33409

Equifax Credit Information Services Inc PO Box 740241 Atlanta, GA 30374

Esse Health PO Box 23340 Saint Louis, MO 63156-3340

Esse Health c/o Account Resolution Corp PO Box 3860 Chesterfield, MO 63006-3860

Esse Health c/o Account Resolution Corp 17600 Chesterfield Airport Road Chesterfield, MO 63005

Experian PO Box 9600 Allen, TX 75013

First USA Bank Dept. OH1-0552ATT 800 Brooksedge Blvd. Westerville, OH 43081-0552

Fleet Bank c/o Midland Credit Managment Bankruptcy Department 8875 Aero Dr Ste 200 San Diego, CA 92123

Fortune Southfield Comapny, LLP c/o Robert W Paster 7733 Forsyth, Ste 2000 Saint Louis, MO 63105

FST Bankcard Center of Omaha PO Box 3412 Omaha, NE 68197

Harris Bank c/o Unifund CCR Partners 10625 Techwoods Cir Cincinnati, OH 45242

Heartland Payment Systems c/o Commercial Services Group, Inc 11603 Shelbyville Rd, Ste 3 Louisville, KY 40243

International Credit Reserve Exchange 8061 Watson Rd, Ste 131 Saint Louis, MO 63119

King Commercial Coporation 10024 Office Center Avenue, Suite 150 Saint Louis, MO 63128

M & I Bank c/o John Lee Jackson 1445 Langham Creek Drive Houston, TX 77084

M & I Bank 770 N Water St Milwaukee, WI 53202

Macy's 9111 Duke Blvd Mason, OH 45040

MBNA America Bank, NA c/o Portfolio Recovery Associates LLC 120 Corporate Blvd Ste 100 Norfolk, VA 23502 MBNA America Bank, NA PO Box 15723 Wilmington, DE 19884

Med Resources 14805 N Outer 40 Road, Ste 100 Chesterfield, MO 63017

Metro West Anesthesia Group PO Box 958864 Saint Louis, MO 63195-8864

Midland Funding LLC C/O Irwin James Frankel, Esq. 9300 Dielman Industrial Drive Ste 100 Saint Louis, MO 63132

Midwest Bank Center 2191 Lemay Ferry Road Saint Louis, MO 63125

Missouri Department of Revenue Bankruptcy Unit PO Box 475 301 W High Street Jefferson City, MO 65105-0475

MRC Recievables c/o JAmes W Murphy, Sheriff City of St. Louis 11 North 11th Street Saint Louis, MO 63101

Quest Diagnostics PO Box 3099 Southeastern, PA 19398-3099

R. Peter Mirkin, MD Tesson Ferry Spine & Ortho Center 12122 Tesson Ferry Road, Suite 100 Saint Louis, MO 63128

S & S Activewear c/o Vincent D Vogler 11330 Olive Blvd PO Box 419037 Saint Louis, MO 63141

S & S Activewear, LLC 2 Gateway Court Bolingbrook, IL 60440 Sallie Mae PO Box 9500 Wilkes Barre, PA 18773-9500

Sam's Club GE Money Bank Attn: Bankruptcy Department PO Box 103104 Roswell, GA 30076

St. Anthony's Medical Center c/o CACi PO Box 270480 Saint Louis, MO 63127-0480

St. Anthony's Medical Center 10016 Kennerly Rd Saint Louis, MO 63128

St. Anthony's Medical Center c/o Computer Credit Inc 640 W 4th St, PO Box 5238 Winston Salem, NC 27113-5328

St. John's Mercy Medical Center c/o NCO Financial Systems Attn Bankruptcy Department PO Box 15636 Wilmington, DE 19850-5889

St. John's Mercy Medical Center Attn: Patient Accounts 615 S. New Ballas Road Saint Louis, MO 63141

St. Louis County Court 10 N Tucker Blvd Saint Louis, MO 63101

The Avenue c/o WFNNB
Bankruptcy Department
PO Box 182125
Columbus, OH 43218-2125

Therapeutic & Diagnostic Imaging LLC PO Box 66726 Saint Louis, MO 63166-6726

Therapuetic & Diagnostic Imaging c/o Day Knight Associates PO Box 5 Grover, MO 63040

TLJ Credit Corp/US Bank c/o Underwood Law Firm 515 Olive Street, Ste 800 Saint Louis, MO 63101

Toyota Motor Credit 5005 N River Blvd NE Cedar Rapids, IA 52411

TransUnion PO Box 2000 Chester, PA 19022-2000

Unifund CCR Partners c/o William Francis Whealen 7606 Forsyth Blvd Saint Louis, MO 63105

Unifund CCR Partners 10625 Techwood Circle Cincinnati, OH 45242

Unifund CCR Partners c/o Saint Louis 10 N Tucker Saint Louis, MO 63101

US Bank
Bankruptcy Department
PO Box 5229
Cincinnati, OH 45201-5229

US Bank c/o Underwood Law Firm 515 Olive Street, Ste 800 Saint Louis, MO 63101

US Bank c/o St. Louis County Association 7900 Carondelet Ave Saint Louis, MO 63105

US Bank c/o Gamache & Myers PC 1111 Woods Mill Rd, Ste 180 Chesterfield, MO 63017

Wachovia PO Box 99604 Arlington, TX 76096-9604

WCP Laboratories Inc PO Box 60013 Saint Louis, MO 63160 West County Radiology Group 555 North New Ballas Road Ste 150 Saint Louis, MO 63141

Yellow Book c/o Saint Louis County Association 7900 Carondelet Saint Louis, MO 63104

Yellow Book USA PO Box 660052 Dallas, TX 75266

In re	Bruce Edwin Hopson Linda Kathryn Hopson	According to the information required to be entered on this statement
	Debtor(s)	(check one box as directed in Part I, III, or VI of this statement):
Case N	Jumber:(If known)	— ☐ The presumption arises.
		■ The presumption does not arise.
		☐ The presumption is temporarily inapplicable.

# CHAPTER 7 STATEMENT OF CURRENT MONTHLY INCOME AND MEANS-TEST CALCULATION

In addition to Schedules I and J, this statement must be completed by every individual chapter 7 debtor, whether or not filing jointly. Unless the exclusion in Line 1C applies, joint debtors may complete a single statement. If the exclusion in Line 1C applies, each joint filer must complete a separate statement.

	Part I. MILITARY AND NON-CONSUMER DEBTORS
1A	<b>Disabled Veterans.</b> If you are a disabled veteran described in the Declaration in this Part IA, (1) check the box at the beginning of the Declaration, (2) check the box for "The presumption does not arise" at the top of this statement, and (3) complete the verification in Part VIII. Do not complete any of the remaining parts of this statement.
	□ <b>Declaration of Disabled Veteran.</b> By checking this box, I declare under penalty of perjury that I am a disabled veteran (as defined in 38 U.S.C. § 3741(1)) whose indebtedness occurred primarily during a period in which I was on active duty (as defined in 10 U.S.C. § 101(d)(1)) or while I was performing a homeland defense activity (as defined in 32 U.S.C. §901(1)).
1B	<b>Non-consumer Debtors.</b> If your debts are not primarily consumer debts, check the box below and complete the verification in Part VIII. Do not complete any of the remaining parts of this statement.
	□ <b>Declaration of non-consumer debts.</b> By checking this box, I declare that my debts are not primarily consumer debts.
	Reservists and National Guard Members; active duty or homeland defense activity. Members of a reserve component of the Armed Forces and members of the National Guard who were called to active duty (as defined in 10 U.S.C. § 101(d)(1)) after September 11, 2001, for a period of at least 90 days, or who have performed homeland defense activity (as defined in 32 U.S.C. § 901(1)) for a period of at least 90 days, are excluded from all forms of means testing during the time of active duty or homeland defense activity and for 540 days thereafter (the "exclusion period"). If you qualify for this temporary exclusion, (1) check the appropriate boxes and complete any required information in the Declaration of Reservists and National Guard Members below, (2) check the box for "The presumption is temporarily inapplicable" at the top of this statement, and (3) complete the verification in Part VIII. During your exclusion period you are not required to complete the balance of this form, but you must complete the form no later than 14 days after the date on which your exclusion period ends, unless the time for filing a motion raising the means test presumption expires in your case before your exclusion period ends.
1C	Declaration of Reservists and National Guard Members. By checking this box and making the appropriate entries below, I declare that I am eligible for a temporary exclusion from means testing because, as a member of a reserve component of the Armed Forces or the National Guard
	a. ☐ I was called to active duty after September 11, 2001, for a period of at least 90 days and
	☐ I remain on active duty /or/
	☐ I was released from active duty on, which is less than 540 days before this bankruptcy case was filed;
	OR
	b.   I am performing homeland defense activity for a period of at least 90 days /or/
	☐ I performed homeland defense activity for a period of at least 90 days, terminating on, which is less than 540 days before this bankruptcy case was filed.

	Part II. CALCULATION OF M	ON	THLY INCO	ME F	OR § 707(b)(7	7) E	XCLUSION		
	Marital/filing status. Check the box that applies a	and co	omplete the balance	e of th	is part of this state	men	t as directed.		
	a. Unmarried. Complete only Column A ("Debtor's Income") for Lines 3-11.								
2	b.  Married, not filing jointly, with declaration perjury: "My spouse and I are legally separate for the purpose of evading the requirements of <b>Income</b> ") for Lines 3-11.	ed un	der applicable non	-bankr	ruptcy law or my s	pous	e and I are living	g ap	art other than
	c.  Married, not filing jointly, without the dec ("Debtor's Income") and Column B ("Spou	:larat	ion of separate hou Income'') for Lin	iseholo <b>es 3-1</b> 1	ds set out in Line 2	l.b al	oove. Complete	bot	h Column A
	d. Married, filing jointly. Complete both Co	olum	n A (''Debtor's Iı	icome'	') and Column B	(''S <sub>I</sub>	ouse's Income'	') fo	or Lines 3-11.
	All figures must reflect average monthly income re						Column A		Column B
	calendar months prior to filing the bankruptcy case the filing. If the amount of monthly income varied						Debtor's		Spouse's
	six-month total by six, and enter the result on the a			, you ii	idst divide the		Income		Income
3	Gross wages, salary, tips, bonuses, overtime, commissions.			\$	2,958.32	\$	1,221.83		
	Income from the operation of a business, profess								
	enter the difference in the appropriate column(s) of business, profession or farm, enter aggregate numb								
	not enter a number less than zero. <b>Do not include</b>								
4	Line b as a deduction in Part V.		•						
			Debtor		Spouse				
	a. Gross receipts	\$ \$	0.00	\$	0.00				
	b. Ordinary and necessary business expenses c. Business income		otract Line b from	+	0.00	Φ	0.00	Ф	0.00
	Rents and other real property income. Subtract	•			the difference in	φ	0.00	φ	0.00
	the appropriate column(s) of Line 5. Do not enter	a nui	mber less than zero	Do 1					
	part of the operating expenses entered on Line b	as a		t V.	1				
5		Ф	Debtor	¢.	Spouse				
	<ul><li>a. Gross receipts</li><li>b. Ordinary and necessary operating expenses</li></ul>	\$ \$	0.00 0.00		0.00				
	c. Rent and other real property income	7	otract Line b from		0.00	\$	0.00	\$	0.00
6	Interest, dividends, and royalties.					\$	0.00		0.00
7	Pension and retirement income.					\$	0.00		0.00
	Any amounts paid by another person or entity, on a regular basis, for the household								
8	expenses of the debtor or the debtor's dependent			-					
	<b>purpose.</b> Do not include alimony or separate maint spouse if Column B is completed.	tenar	ice payments or ar	nounts	paid by your	\$	0.00	\$	0.00
	Unemployment compensation. Enter the amount i	in the	e appropriate colu	nn(s) c	of Line 9.	Ψ	0.00	Ψ	0.00
	However, if you contend that unemployment comp	ensa	tion received by ye	ou or y	our spouse was a				
9	benefit under the Social Security Act, do not list th or B, but instead state the amount in the space belo		ount of such comp	ensati	on in Column A				
	Unemployment compensation claimed to	w.							
	be a benefit under the Social Security Act Debtor	r \$	<b>0.00</b> Sp	ouse \$	0.00	\$	0.00	\$	0.00
10	Income from all other sources. Specify source and on a separate page. Do not include alimony or sep spouse if Column B is completed, but include all maintenance. Do not include any benefits received received as a victim of a war crime, crime against h domestic terrorism.	<b>parat</b> I <b>othe</b> d und	e maintenance pa er payments of ali ler the Social Secu	yment mony rity Ac	s paid by your or separate et or payments	Ψ	0.00	<del>y</del>	0.00
10	domestic terrorism.		Debtor		Spouse				
	a.	\$	Detitol	\$	Spouse				
	b.	\$		\$					
	Total and enter on Line 10	_			_	\$	0.00	\$	0.00
11	Subtotal of Current Monthly Income for § 707(b								
11	Column B is completed, add Lines 3 through 10 in	Col	umn B. Enter the	total(s)	).	\$	2,958.32	\$	1,221.83

12	<b>Total Current Monthly Income for § 707(b)(7).</b> If Column B has Column A to Line 11, Column B, and enter the total. If Column B the amount from Line 11, Column A.				4,180.15	
	Part III. APPLICATION OF	§ 707(b)(7) EXCLUSION				
13	<b>Annualized Current Monthly Income for § 707(b)(7).</b> Multiply enter the result.	he amount from Line 12 by the nu	mber 12 and	\$	50,161.80	
14	<b>Applicable median family income.</b> Enter the median family income. (This information is available by family size at <a href="www.usdoj.gov/ust/">www.usdoj.gov/ust/</a>					
	a. Enter debtor's state of residence: MO b. Enter	er debtor's household size:	3	\$	58,473.00	
	<b>Application of Section 707(b)(7).</b> Check the applicable box and pr	oceed as directed.				
15	The amount on Line 13 is less than or equal to the amount on Line 14. Check the box for "The presumption does not arise" at the top of page 1 of this statement, and complete Part VIII; do not complete Parts IV, V, VI or VII.					
	☐ The amount on Line 13 is more than the amount on Line 14	. Complete the remaining parts of	this statement	•		

Complete Parts IV, V, VI, and VII of this statement only if required. (See Line 15.)

	Part IV. CALCULATION OF CU	RREN	Γ MONTHLY INCOM	ME FOR § 707(b)(2	2)	
16 Enter the amount from Line 12.					\$	
17						
	a. b.		\$ \$			
	c. d.		\$ \$			
	Total and enter on Line 17		Φ		\$	
18	Current monthly income for § 707(b)(2). Subtract L	ine 17 fro	om Line 16 and enter the resu	ılt.	\$	
	Part V. CALCULATION OF DEDUCTIONS FROM INCOME					
	Subpart A: Deductions under S	tandard	ls of the Internal Revenu	ie Service (IRS)		
19A	National Standards: food, clothing and other items. Enter in Line 19A the "Total" amount from IRS National Standards for Food, Clothing and Other Items for the applicable household size. (This information is available at <a href="https://www.usdoj.gov/ust/">www.usdoj.gov/ust/</a> or from the clerk of the bankruptcy court.)					
19B	National Standards: health care. Enter in Line a1 below the amount from IRS National Standards for Out-of-Pocket Health Care for persons under 65 years of age, and in Line a2 the IRS National Standards for Out-of-Pocket Health Care for persons 65 years of age or older. (This information is available at <a href="https://www.usdoj.gov/ust/">www.usdoj.gov/ust/</a> or from the clerk of the bankruptcy court.) Enter in Line b1 the number of members of your household who are under 65 years of age, and enter in Line b2 the number of members of your household who are 65 years of age or older. (The total number of household members must be the same as the number stated in Line 14b.) Multiply Line a1 by Line b1 to obtain a total amount for household members under 65, and enter the result in Line c1. Multiply Line a2 by Line b2 to obtain a total amount for household members 65 and older, and enter the result in Line c2. Add Lines c1 and c2 to obtain a total health care amount, and enter the result in Line 19B.					
	Household members under 65 years of age		usehold members 65 years	of age or older		
	<ul><li>a1. Allowance per member</li><li>b1. Number of members</li></ul>	a2.	Allowance per member Number of members			
	c1. Subtotal	c2.	Subtotal		\$	
20A	Local Standards: housing and utilities; non-mortgage expenses. Enter the amount of the IRS Housing and Utilities Standards; non-mortgage expenses for the applicable county and household size. (This information is available at <a href="https://www.usdoj.gov/ust/">www.usdoj.gov/ust/</a> or from the clerk of the bankruptcy court).					

20B	Local Sta Housing a available a Monthly F the result				
	b. Av	S Housing and Utilities Standards; mortgage/rental expense erage Monthly Payment for any debts secured by your me, if any, as stated in Line 42	\$		
		t mortgage/rental expense	Subtract Line b from Line a.	\$	
21	20B does Standards	<b>indards: housing and utilities; adjustment.</b> If you contend not accurately compute the allowance to which you are entity, enter any additional amount to which you contend you are in the space below:	tled under the IRS Housing and Utilities	\$	
22A	You are envehicle an Check the included a	ndards: transportation; vehicle operation/public transpontitled to an expense allowance in this category regardless of defeated transportation. In the number of vehicles for which you pay the operating expenses a contribution to your household expenses in Line 8.	f whether you pay the expenses of operating a		
	If you che Transporta Standards Census Re	\$			
22B	Local Standards: transportation; additional public transportation expense. If you pay the operating expenses for a vehicle and also use public transportation, and you contend that you are entitled to an additional deduction for you public transportation expenses, enter on Line 22B the "Public Transportation" amount from IRS Local Standards: Transportation. (This amount is available at <a href="https://www.usdoj.gov/ust/">www.usdoj.gov/ust/</a> or from the clerk of the bankruptcy court.)				
23	Monthly Payments for any debts secured by Vehicle 1, as stated in Line 42; subtract Line b from Line a and enter				
		in Line 23. <b>Do not enter an amount less than zero.</b> S Transportation Standards, Ownership Costs	\$		
	b. Av	erage Monthly Payment for any debts secured by Vehicle as stated in Line 42	\$		
	c. Ne	t ownership/lease expense for Vehicle 1	Subtract Line b from Line a.	\$	
24	Local Standards: transportation ownership/lease expense; Vehicle 2. Complete this Line only if you checked the "2 or more" Box in Line 23.  Enter, in Line a below, the "Ownership Costs" for "One Car" from the IRS Local Standards: Transportation (available at <a href="www.usdoj.gov/ust/">www.usdoj.gov/ust/</a> or from the clerk of the bankruptcy court); enter in Line b the total of the Average Monthly Payments for any debts secured by Vehicle 2, as stated in Line 42; subtract Line b from Line a and enter the result in Line 24. Do not enter an amount less than zero.				
	b. Av 2, a	S Transportation Standards, Ownership Costs rerage Monthly Payment for any debts secured by Vehicle as stated in Line 42 t ownership/lease expense for Vehicle 2	\$ Subtract Line b from Line a.	\$	
25	state and l	cessary Expenses: taxes. Enter the total average monthly en local taxes, other than real estate and sales taxes, such as inc axes, and Medicare taxes. Do not include real estate or sale	ome taxes, self employment taxes, social	\$	
		ty mass, and modicate mass. Do not include real estate of sales mass.			

26	Other Necessary Expenses: involuntary deductions for employment. Enter the total average monthly payroll deductions that are required for your employment, such as retirement contributions, union dues, and uniform costs. Do not include discretionary amounts, such as voluntary 401(k) contributions.	\$	
27	Other Necessary Expenses: life insurance. Enter total average monthly premiums that you actually pay for term life insurance for yourself. Do not include premiums for insurance on your dependents, for whole life or for any other form of insurance.	\$	
28	Other Necessary Expenses: court-ordered payments. Enter the total monthly amount that you are required to pay pursuant to the order of a court or administrative agency, such as spousal or child support payments. Do not include payments on past due obligations included in Line 44.	\$	
29	Other Necessary Expenses: education for employment or for a physically or mentally challenged child. Enter the total average monthly amount that you actually expend for education that is a condition of employment and for education that is required for a physically or mentally challenged dependent child for whom no public education providing similar services is available.	\$	
30	Other Necessary Expenses: childcare. Enter the total average monthly amount that you actually expend on childcare - such as baby-sitting, day care, nursery and preschool. Do not include other educational payments.	\$	
31	Other Necessary Expenses: health care. Enter the total average monthly amount that you actually expend on health care that is required for the health and welfare of yourself or your dependents, that is not reimbursed by insurance or paid by a health savings account, and that is in excess of the amount entered in Line 19B. Do not include payments for health insurance or health savings accounts listed in Line 34.		
32	Other Necessary Expenses: telecommunication services. Enter the total average monthly amount that you actually pay for telecommunication services other than your basic home telephone and cell phone service - such as pagers, call waiting, caller id, special long distance, or internet service - to the extent necessary for your health and welfare or that of your dependents. Do not include any amount previously deducted.		
33	Total Expenses Allowed under IRS Standards. Enter the total of Lines 19 through 32.		
	Subpart B: Additional Living Expense Deductions  Note: Do not include any expenses that you have listed in Lines 19-32  Health Insurance, Disability Insurance, and Health Savings Account Expenses. List the monthly expenses in		
34	the categories set out in lines a-c below that are reasonably necessary for yourself, your spouse, or your dependents.		
34	a. Health Insurance \$		
	b. Disability Insurance \$		
	c. Health Savings Account \$	\$	
	Total and enter on Line 34.		
	If you do not actually expend this total amount, state your actual total average monthly expenditures in the space below:		
	\$		
35	Continued contributions to the care of household or family members. Enter the total average actual monthly expenses that you will continue to pay for the reasonable and necessary care and support of an elderly, chronically ill, or disabled member of your household or member of your immediate family who is unable to pay for such		
	expenses.	\$	
36	<b>Protection against family violence.</b> Enter the total average reasonably necessary monthly expenses that you actually incurred to maintain the safety of your family under the Family Violence Prevention and Services Act or other applicable federal law. The nature of these expenses is required to be kept confidential by the court.	\$	
37	Home energy costs. Enter the total average monthly amount, in excess of the allowance specified by IRS Local Standards for Housing and Utilities, that you actually expend for home energy costs. You must provide your case trustee with documentation of your actual expenses, and you must demonstrate that the additional amount claimed is reasonable and necessary.	\$	
38	Education expenses for dependent children less than 18. Enter the total average monthly expenses that you actually incur, not to exceed \$137.50 per child, for attendance at a private or public elementary or secondary school by your dependent children less than 18 years of age. You must provide your case trustee with documentation of your actual expenses, and you must explain why the amount claimed is reasonable and		

39	Additional food and clothing expense. Enter the expenses exceed the combined allowances for fool Standards, not to exceed 5% of those combined for from the clerk of the bankruptcy court.) You reasonable and necessary.	\$			
40	Continued charitable contributions. Enter the financial instruments to a charitable organization			e form of cash or	\$
41	Total Additional Expense Deductions under § 707(b). Enter the total of Lines 34 through 40			\$	
	Subpart	C: Deductions for Deb	t Payment		
42	<b>Future payments on secured claims.</b> For each of your debts that is secured by an interest in property that you own, list the name of the creditor, identify the property securing the debt, and state the Average Monthly Payment, and check whether the payment includes taxes or insurance. The Average Monthly Payment is the total of all amounts scheduled as contractually due to each Secured Creditor in the 60 months following the filing of the bankruptcy case, divided by 60. If necessary, list additional entries on a separate page. Enter the total of the Average Monthly Payments on Line 42.				
	Name of Creditor Property a.	Securing the Debt		Does payment include taxes or insurance?	
			Total: Add Lines	·	\$
43	Other payments on secured claims. If any of debts listed in Line 42 are secured by your primary residence, a motor vehicle, or other property necessary for your support or the support of your dependents, you may include in your deduction 1/60th of any amount (the "cure amount") that you must pay the creditor in addition to the payments listed in Line 42, in order to maintain possession of the property. The cure amount would include any sums in default that must be paid in order to avoid repossession or foreclosure. List and total any such amounts in the following chart. If necessary, list additional entries on a separate page.    Name of Creditor				\$
44	Payments on prepetition priority claims. Enter priority tax, child support and alimony claims, for not include current obligations, such as those states.	or which you were liable at th			\$
	<b>Chapter 13 administrative expenses.</b> If you are chart, multiply the amount in line a by the amount				
45	<ul> <li>a. Projected average monthly Chapter 13 p</li> <li>b. Current multiplier for your district as de issued by the Executive Office for Unite information is available at <a href="https://www.usdoj.g">www.usdoj.g</a> the bankruptcy court.)</li> <li>c. Average monthly administrative expense</li> </ul>	termined under schedules d States Trustees. (This ov/ust/ or from the clerk of	\$ x Total: Multiply Line	es a and b	\$
46	Total Deductions for Debt Payment. Enter the	total of Lines 42 through 45.			\$
	Subpart 1	D: Total Deductions fro	om Income		Ψ
47	Total of all deductions allowed under § 707(b)				\$
	Part VI. DETERM	INATION OF § 707(b)	(2) PRESUMP	ΓΙΟΝ	
48	Enter the amount from Line 18 (Current mon	thly income for § 707(b)(2))			\$
49	Enter the amount from Line 47 (Total of all de	eductions allowed under § 7	07(b)(2))		\$
50	Monthly disposable income under § 707(b)(2).	Subtract Line 49 from Line	48 and enter the resu	lt.	\$
51	60-month disposable income under § 707(b)(2) result.	). Multiply the amount in Lin	e 50 by the number	60 and enter the	\$

	Initial presumption determination. Check the applicable box and proceed as directed.					
52	☐ The amount on Line 51 is less than \$6,575. Check the box for "The presumption does not arise" at the top of page 1 of this statement, and complete the verification in Part VIII. Do not complete the remainder of Part VI.					
52	☐ The amount set forth on Line 51 is more than \$10,950 Check the box for "The presumption arises" at the top of page 1 of this statement, and complete the verification in Part VIII. You may also complete Part VII. Do not complete the remainder of Part VI.					
	☐ The amount on Line 51 is at least \$6,575, but not more than \$10,950. Complete the remainder of Part VI (Li	nes 53 through 55).				
53	Enter the amount of your total non-priority unsecured debt	\$				
54	<b>Threshold debt payment amount.</b> Multiply the amount in Line 53 by the number 0.25 and enter the result.	\$				
	Secondary presumption determination. Check the applicable box and proceed as directed.					
55	☐ The amount on Line 51 is less than the amount on Line 54. Check the box for "The presumption does not are 1 of this statement, and complete the verification in Part VIII.	ise" at the top of page				
33	☐ The amount on Line 51 is equal to or greater than the amount on Line 54. Check the box for "The presumption arises" at the top of page 1 of this statement, and complete the verification in Part VIII. You may also complete Part VII.					
	Part VII. ADDITIONAL EXPENSE CLAIMS					
	Other Expenses. List and describe any monthly expenses, not otherwise stated in this form, that are required for the health and welfare of you and your family and that you contend should be an additional deduction from your current monthly income under § 707(b)(2)(A)(ii)(I). If necessary, list additional sources on a separate page. All figures should reflect your average monthly expense for each item. Total the expenses.					
56	Expense Description Monthly Amount	nt				
	a.					
	c. \$					
	d. \$					
	Total: Add Lines a, b, c, and d \$					
Part VIII. VERIFICATION						
	I declare under penalty of perjury that the information provided in this statement is true and correct. (If this is a joint case, both debtors					
	must sign.) Date: June 11, 2009 Signature: /s/ Bruce Edwin Hopson					
	Bruce Edwin Hopson					
57	(Debtor)					
	Date: June 11, 2009 Signature /s/ Linda Kathryn Hopson					
	Linda Kathryn Hopson					
	(Joint Debtor, if an	ıy)				